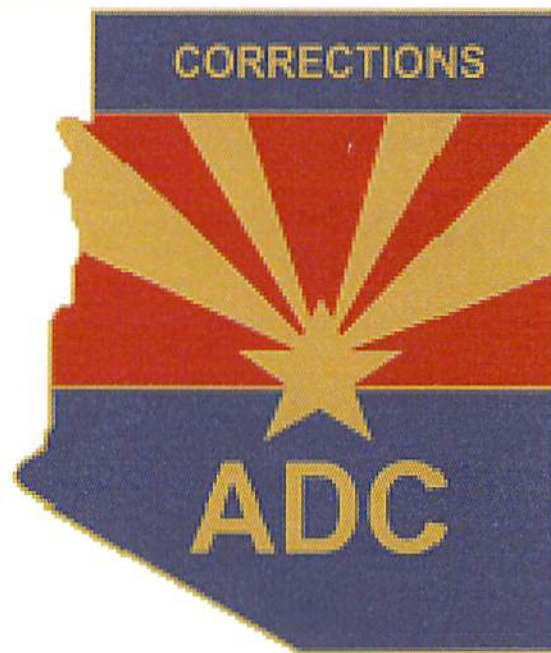


ARIZONA DEPARTMENT



OF CORRECTIONS

**ARIZONA DEPARTMENT OF CORRECTIONS
INSPECTOR GENERAL BUREAU**

Inspections Unit

ASPC-LEWIS ANNUAL INSPECTION

January 28, 2011

Executive Summary ASPC – Lewis

COMPLEX OVERVIEW:

ASPC-Lewis is a 5234 bed prison complex of adult male inmates ranging from minimum to close custody with approximately 1200 staff.

AUDIT SCOPE:

The inspection began on January 24, 2011 and was completed on January 28, 2011. The Review included the following units: Complex, Bachman, Barchey, Buckley, Morey, Rast, Stiner, and Sunrise/Eagle Point.

INSPECTION METHODOLOGY:

With New Data Collection Instruments, (DCI's) the Inspections Unit inspected thirteen competencies.

INSPECTIONS TEAM:

The Inspections team consisted of 6 members of the Inspections Unit and two Correctional Majors.

Jeffrey Lewis	Morey Team Leader
Larry Ridge	Stiner
Ron Abbl	Buckley
William Houser	Rast
Barbra Savage	Bachman
Lynette Stevens	Eagle Point/Sunrise
Richard Haggard	Barchey
Thomas Higgenson	Complex

RECAP OF FINDINGS:

There were a total of 326 findings for ASPC-Lewis. The Unit findings are as follows.

Morey Unit	46
Stiner Unit	72
Buckley Unit	59
Rast Unit	53
Bachman Unit	35
Eagle Point/Sunrise	23
Barchey	9
Complex	29

MOREY UNIT

CLASSIFICATION

1. Does the inmate's assigned CO III notify the inmate of the Central Office Classification action and notate in AIMS when the inmate has been notified and of the inmate's right to Appeal?"

Finding: Unit COIII's not making entries on AIMS screen.

COUNT MOVEMENT

1. Does the unit have a picture board that is updated and matches the unit inmate count?

Finding: 68 photos missing from count board.

2. Observe an officer clearing count. Is this procedure done correctly?

Finding: Count Officer is clearing count without notifying the Shift Commander.

3. Is the shift supervisor actively involved in the count process to ensure its accuracy?"

Finding: No supervisor involvement was observed during formal count.

4. Does the shift supervisor or commander clear all formal counts?

Finding: No, count being cleared by Count Movement officer..

FOOD SERVICE

1. Review AIMS screens for all inmates assigned to the kitchen. Are all inmates assigned to the kitchen medically cleared?

Finding: Two inmates who are currently assigned in the kitchen were not cleared by medical.

2. Are equipment repairs handled correctly, and in a timely manner?

Finding: There were no outlet covers on south wall of kitchen and no evidence of action being taken.

INGRESS/EGRESS

1. Observe staff and other persons entering the unit to determine compliance to post orders / unit directives. Are assigned staff compliant with post directives listed in post orders?

Finding: Inspectors cell phone not checked, food items waved through the metal detector, and hand wand on site not working properly.

MOREY UNIT

2. Are all staff entering the unit required to pass through a metal detector while being observed by the assigned officer?

Finding: Lobby officer was busy checking backpacks/bags and did not watch staff walk through the metal detector.

3. Observe break areas and offices for personal property items that are not in compliance, or have not been authorized. Are the areas free of contraband / unauthorized property?

Finding: Glass candle jars and non-see through containers observed in various areas.

4. Observe break rooms / lunch areas, or other locations where staff consume meals. Are unauthorized / excessive food items, utensils, or related meal items present?

Finding: Some of the items in briefing room refrigerator were not in see through containers.

5. Inspect unit ingress / egress points and determine if there are locations where staff can by-pass and/or defeat this procedure. Are the locations secure to the degree staff cannot by-pass the security station?

Finding: No physical barrier preventing staff from returning to an unsecured area after passing through the metal detector.

6. Monitor access points to verify all staff, and associated personal property are searched prior to access being granted to the unit. Were all staff members searched thoroughly prior to entering?"

Finding: Staff are not thoroughly searched / inspected prior to being allowed to enter the unit.

7. Do assigned staff members inspect / search all personal property to include food items, and require applicable items to be cleared via the metal detector?"

Finding: There was no consistent approach by the observed officers.

KEYS AND RADIOS

1. Will a visual inspection of designated key storage areas allow for easy identification of missing key rings?

Finding: Five key hooks in emergency key box have two key sets on one hook. The inventory shows 12 key sets when there are actually 17 sets.

MOREY UNIT

PERIMETER AND TOWERS

1. Does the post journal have all required entries? Inspect any secondary logs the tower staff are responsible for completing?

Finding: Correctional Service Journal did not have security device checks annotated.

2. Close custody units - Do the lights in the adjacent zones to either side of the alarmed zone activate when an alarm condition triggers the quarts lights associated with the alarmed zone? Interview random staff assigned to the control room to determine action taken when an alarm is activated.

Finding: Lights 12, 14, 42, and 43 did not activate when zone accessed.

3. Close custody units - Does the unit have an external sand trap at least 15 feet in width and sloped to provide drainage without erosion of sand material?

Finding: Drainage is not proper causing heavy erosion at first perimeter fence at lights 38, 39 and 40.

4. Close custody units - Is there one section of 30" razor ribbon vertically in each corner and at the fence intersection including on the yard side where fences contact buildings?

Finding: No vertical razor ribbon on the North/West corner of the B building.

SECURITY DEVICES

1. Were appropriate entries made in the Correctional Service Journal?

Finding: No consistency with entries in Correctional Service Journal

2. Does the Chief of Security ensure SDI work order log repairs are made within time frames?

Finding: Zone lights out since 12-31-2010, still not functioning on 01-24-2011.

3. Do interviews with staff indicate if the EEO Liaison conducts tours or attend briefings/meetings each month on the Unit?

Finding: Per the assigned EEO liaison unit tours and shift briefings are not occurring.

4. Does a review of random EEO Liaison reports indicate the assigned EEO liaison is making required tours?

Finding: Per the assigned EEO liaison unit tours are not occurring.

MOREY UNIT

TOOLS

1. Are tools too large to store on the shadow board in a location where an outline resembling the tool is clearly shown?

Finding: The Drag tool secured to wall within the entry of the unit was not shadowed.

2. Are tools being signed out/in appropriately on the correct form? (Tool Check out Form 712-4)

Finding: Power Auger out but not signed out.

3. Observe posted inventory sheets. Compare inventory with stored tool. Is the inventory accurate?

Finding: Two sets of hair clippers found in flammable storage cabinet were not inventoried.

4. Are tools stored on a shadow board with shadow that closely resembles the tool?

Finding: Medical Tools are stored in a filing cabinet with no shadow.

5. Are all tool inventories logged into the appropriate Correctional Service Journal by those staff who conducted the inventories?

Finding: No Correctional Service Journal being used, and no daily inventory being conducted.

6. Are updated MSDS sheets found at all storage locations, for all products found inside the storage site?

Finding: Mixture of current and old MSDS sheets for the same product.

WEAPONS

1. Are staff members who are checking the seal on the DART locker at the beginning of each work shift and its condition documenting their findings in a Correctional Service Journal?

Finding: Seal numbers not being entered in Correctional Service Journal.

2. Interview the Chief of Security and Armorer. Determine the number of times the locker has been accessed during the previous six months. If so, have there been entries in the Correctional Service Journal and IR's been submitted for each instance?

Finding: Entries not being made in Correctional Service Journal.

3. Are weapons issued only to officers, including TSU and DART teams, with current Firearms Qualification Card in their possession when the weapon is being issued?

Finding: Two DART responders did not have qualification cards on them.

MOREY UNIT

DETENTION SERVICES

1. Review a random selection of post journals. Are command and services staff visiting as required and/or needed (religious, medical/mental watch, counseling staff included)?

Finding: There were no entries for medical visits on observed documentation.

2. Inspect detention facility (including cells). Is the area clean and sanitary?

Finding: Control Room and bathroom not clean.

3. Observe a sanitation inspection during a shift. Are all areas in the unit inspected during the shift?

Finding: Correctional Service Journal stated all areas were in compliance but the Control Room and bathroom were not clean to include a bag of trash so old the food was fermenting.

INMATE MANAGEMENT

1. Does the log reflect that grievances were addressed by the unit Deputy Warden within 15 days?

Finding: Time frames not being met.

2. Does the grievance log reflect the grievance appeal was submitted to the warden within time frames and was the grievance responded to within time frames?

Finding: Time frames not being met.

3. When searches are being conducted, is the search completed in a fashion which prevents inmate from passing contraband to another inmate during the search?

Finding: Staff not redirecting Inmates from approaching the Recreation fence when going to or returning from meal turn-outs.

REQUIRED SERVICES

1. Is all outgoing mail delivered to the post office within 24 hours unless circumstances make delivery impractical?

Finding: Staff stated it sometimes take 36 hours.

2. Of the files reviewed, does every 911-1 have the potential visitors full name, date of birth, address, phone number and relationship filled out?

Finding: 3 inspected files were missing information (i.e. phone number or relationship).

MOREY UNIT

3. Is the visitation file forwarded to the new unit within the first working day following an emergency movement?

Finding: One of the inspected files (01/24/11) belonged to an inmate who has been housed at Yuma since 11-15-2010.

4. Were all observed moustaches, side-burns, and goatee's meeting policy requirements?

Finding: Staff observed with "soul-patches".

5. Were uniforms observed to be clean, in good condition, and devoid of stains or patched areas?

Finding: Staff were observed wearing baggy/worn out pants, and worn out t-shirts.

6. Were uniform shoes, boots and accouterments shined?

Finding: Staff observed wearing excessively dirty boots.

7. Is the following guidelines followed: Class "C" trousers, as outlined on Attachment C, may be worn as outlined in 1.2.3.4.2. These "B.D.U." style trousers shall be worn only with military style boots and shall be worn bloused, if designed to be bloused?

Finding: Staff observed wearing BDU pants without blousing them.

8. Are officers assigned to high risk areas wearing protective vests, and eye cover at all times when engaged in activities which could result in inmate contact?

Finding: Staff were observed in MDU with no vests or eye protection being worn.

STINER UNIT

CLASSIFICATION

1. Review DI95 screen for C0301 and C0401 appointments. Are any out of date?

Finding: Several inmates who were of date when observing the DI95 screen.

2. Has the required information been entered in AIMS?

Finding: 1 Interstate Corrections Compact inmate in the Detention unit. There are no AIMS comments made.

3. Randomly select an adequate number of inmates assigned to Inmate Work Programs and review the inmates' AIMS files. Are the inmates' work assignments commensurate with the custody level of the inmates?

Finding: Health unit porter should not have been assigned to work in the health unit due to his past drug history.

COUNT MOVEMENT

1. Review a random sample of formal Count Sheets. Is the information recorded correctly?

Finding: Shift Commander is not consistently signing the count sheets in the Accountability Office.

2. Review a random sample of emergency (when applicable) Count Sheets. Is the information recorded correctly? Is the reason for the emergency count documented?

Finding: "EMERGENCY COUNT" is not documented on all count sheets to show the count was for emergency reasons.

3. Does the shift supervisor or commander review and sign all formal count sheets?

Finding: Shift Commanders are not consistently signing all formal count sheets.

FOOD SERVICE

1. Do Food Service Employees ensure sanitary standards are met in all food service operations?

Finding: Food and trash was observed on the floor. Walls were dirty and food preparation areas were not clean. There was no sanitizer in the rinse sink or in random sanitizer buckets checked throughout the kitchen area.

STINER UNIT

2. Are inmates in detention fed properly?

Finding: Cold and hot food are both served on the same tray. The trays are kept hot in warmers which makes the cold food warm/hot.

INGRESS/EGRESS

1. Observe staff and other persons entering the unit to determine compliance to post orders / unit directives. Are assigned staff compliant with post directives listed in post orders?

Finding: No mention of duties of lobby area listed in Visitation Officers Post Order. Staff entering unit are not challenged for unauthorized items. Food is not consistently being required to pass through the metal detector.

2. Test system repetitively during course of inspection to determine if procedures are applied on a constant basis. Did staff consistently apply security protocols during the visit? "

Finding: There is no consistency in the security of the front lobby area. Poor security practices are used by multiple staff.

3. Evaluate procedure for inspecting personal employee property staff are attempting to introduce to the unit. Does the procedure contain clear direction for security officers?

Finding: There was no observed written procedure on the post for this. The protocol in place is ineffective. Staff did not consistently know how to check if a person was approved to bring on personal property. My State issued cell phone was not regularly checked during the course of the inspection.

4. Does the assigned officer question each person attempting to enter the unit in regard to possession of contraband items?

Finding: Not all of the staff are being questioned for contraband.

5. Does the officer consistently inspect incoming property for possible contraband?

Finding: There is no consistency in this process. Some staff are conducting thorough inspections. Other staff conducts a "rough scan" of staff property.

6. Does the staff member have an allowable personal property form signed by the current Deputy Warden authorizing these items?

Finding: Some personal property forms are outdated with signatures from past Administrators and not all personal property is listed on forms on hand.

STINER UNIT

7. Observe break areas and offices for personal property items that are not in compliance, or have not been authorized. Are the areas free of contraband / unauthorized property?

Finding: Staff briefing room is cluttered with visible dirty food storage containers and trash on table areas.

8. Does the Chief of Security have copies of all of the allowable personal property forms submitted by the unit staff?

Finding: The Chief of Security does not maintain a copy of all allowable personal property forms. Only copy is stored at the front lobby.

9. Evaluate procedure for inspecting food items staff members are attempting to introduce to the unit. Does the unit procedure provide clear guidelines for assigned staff?"

Finding: Did not observe this appropriately addressed in the visitation officers post order.

10. Does the officer scan food items, and question any abnormal observations such as excessive amounts, containers which do not allow for visual inspection, or questionable items such as metal utensils?

Finding: Officers did not question items brought into the unit.

11. Does the officer ensure all food containers / packages are brought through the metal detector?

Finding: Not all food items are required to pass through the metal scanner.

12. Does the officer question any manufactured food items sealed in original packaging, causing difficulty in screening the contents inside?

Finding: Food items were not questioned.

13. Evaluate all public access points and determine if an authorized search protocol is in place

Finding: Staff conducting these duties could not speak to post orders or protocol. No reference or instruction was available for viewing.

14. Monitor access points to verify all staff, and associated personal property are searched prior to access being granted to the unit. Were all staff members searched thoroughly prior to entering?"

Finding: Staff are not thoroughly searched / inspected prior to being allowed to enter the unit.

STINER UNIT

15. Do assigned staff members inspect / search all personal property to include food items, and require applicable items to be cleared via the metal detector?"

Finding: There was no observed consistent approach to this. The duties varied depending on what officer conducted the inspection or who was around.

16. Inspect unit ingress / egress points and determine if there are locations where staff can by-pass and/or defeat this procedure. Are the locations secure to the degree staff cannot by-pass the security station?

Finding: The physical set up of this area allows staff to defeat the process of checking property brought into the unit.

KEYS AND RADIOS

1. Does the inventory list all available keys, the total number of each on hand, along with the corresponding locking device each key will access?

Finding: The Master Key inventory does not list the total number of keys on hand. This information is documented in a separate report (Best report) which is not included with the Master Key Inventory report to the C.O.S.

2. Does the inventory match up with existing key stock on hand? Compare inventory with available keys.

Finding: There were 16 keys sets reported as being out for repair but are reported "on site" on the daily key inventory completed by the officer in main control. 6 were restricted and 10 were non- restricted.

3. Does the unit have a monthly report on file showing the inspection and inventory of keys/key rings, emergency keys/key rings and locking devices for the past twelve months?

Finding: The key control officer did not have any record of any Master Key Inventories prior to 10/2010. The C.O.S. did not have a copy of any past Master Key Inventories available for viewing.

4. Are all the key rings for a unit or specified zone (i.e.; complex security) stored and issued from a designated Central Control Area?

Finding: SDU key sets are not checked out from Main control. They are stored in SDU control room. They are not accounted for accurately on a key control log. The log is in place but not filled out correctly.

STINER UNIT

5. Each time a key set is issued, or returned does the officer responsible make the appropriate entry in the Key and Credit Card Control sheet (Form 702-1) specifying at a minimum: Key number, date of issue/return, name of authorized staff member, initial of issuing staff member, name of staff returning key set and initial of staff receiving key set back?

Finding: Restricted keys in the "Restricted key box # 2 are not signed out through Main control. Key set 31 (restricted) was not signed out on the key check out log.

6. Does each emergency key ring have a clearly visible color coded tag to identify the portals and/or buildings the key set will access?

Finding: Duplicate emergency key set #2 is supposed to be color coded white. There is no color painted on the key set.

7. Does the staff member demonstrate the ability to obtain and utilize emergency keys? Randomly select a staff member from each unit and each shift and direct them to gain access to the emergency keys for a specific location and monitor their progress.

Finding: Staff interviewed were not able to describe the process and required prompting to answer how to access and use the emergency keys.

8. Are the radios serviceable and being utilized properly i.e. use of call signs, clear transmissions, no unnecessary conversation?

Finding: There were 8 radios noted as unserviceable. Key control officer was aware of them.

STINER UNIT

SECURITY DEVICES

1. When deficiencies are noted, does all documentation contain the cross referenced information report number from the corresponding information report(s)?

Finding: Information Report numbers for SDI discrepancies and work orders are not included in Correctional Service Journals consistently.

2. Does the Chief of Security ensure SDI work order log repairs are made within time frames?

Finding: SDI's reported on the weekly report are out of time frames. 8/21/07 is the oldest reported discrepancy with is being reported as a contractual issue. The next oldest reported SDI is 2/4/10.

3. Does the Shift Commander/Supervisor ensure staff members complete the required inspections of security devices?

Finding: Staff do not accurately document/define SDI problems consistently in Correctional Service Journals at the beginning of shift.

4. Do interviews with staff indicate if the EEO Liaison conduct tours or attend briefings/meetings each month on the Unit?

Finding: Staff interviewed did not know who their EEO representative is.

TOOLS

1. Are tools stored on a shadow board with shadow that closely resembles the tool?

Finding: Some shadows do not resemble the tool it is associated with.

2. Are tools being signed out/in appropriately on the correct form? (Tool Check Out Form 712-4)

Finding: Not all tools are consistently or correctly being signed in/out.

3. Are inventory sheets placed in all areas where tools are stored within the authorized location?

Finding: Not all tool locations have a proper or accurate tool inventory posted on them.

STINER UNIT

4. Observe posted inventory sheets. Compare inventory with stored tool. Is the inventory accurate?

Finding: Tool crib #3 inventory is inaccurate, off by 3 tools.

5. Did the officer ensure all appropriate documents were completed?

Finding: There are tools listed on multiple tool inventory sheets.

6. Are all tools permanently engraved/stamped and color-coded?

Finding: Not all tools are permanently engraved or color coded.

7. Are all tools color-coded using the applicable units assigned color?

Finding: Not all tools have the units identified color code painted on them.

8. Is this location secured at all times, with a seal, and a master inventory contained within?

Finding: The door accessing the tool storage area was observed being left open and not secured. Tool cage was locked but there was no seal placed on the cage door.

9. Are all tool inventories logged into the appropriate Correctional Service Journal by those staff who conducted the inventories?

Finding: Not all tools are logged into the appropriate correctional service journal. (i.e. suicide scissors not logged in all control room journals)

10. Are all shadow boards clean, and clearly marked with silhouettes closely mirroring the tools to allow for easily visual inspection and inventories?"

Finding: Kitchen tools silhouettes do not match shape of tool.

11. Are all kitchen tools checked in / out using Tool Check Out forms, which are kept on-site for 30 days by the Food Service Supervisor?

Finding: Kitchen tools are not signed in/out accurately.

WEAPONS

1. Examine the weapons and ammunition for serviceability. Does the Armorer establish and maintain a system of checks and standards to ensure that firearms were maintained and in functional condition?

Finding: Weapons in tower are rusted and very dirty. There does not appear to be a check conducted on the unit weapons to ensure functional ability.

STINER UNIT

2. While conducting your physical inventory of weapons, check a random selection to assess the quality of the repair and cleaning of these weapons. Do the weapons inspected appear clean, and serviceable?

Finding: Weapons are visibly dirty and rusted.

3. Are all assigned weapons inspected, tested, cleaned and maintained according to the requirements listed above?

Finding: Weapons are visibly dirty and rusted.

4. Is an accurate inventory of all assigned firearms, operational ammunition, chemical agents and other equipment being completed weekly using the Weekly Inventory, form 716-3?

Finding: Inventory is conducted only when the weapons locker is opened.

DETENTION SERVICES

1. Review a random selection of Individual Inmate Detention Record, form 804-3. Do the logs include information listed under 1.4-1.4.2?

Finding: Health staff are not notified in writing on IDR when inmates are placed into Detention.

2. If there is a watch during the time of the audit, are the watch procedures in compliance?

Finding: 10 Minute watch was out of time frames by 12 minutes (22 minutes since last entry).

3. If there is a watch during the time of the audit, observe performance of security staff and are they in compliance?

Finding: Staff observed not wearing stab vest or safety glasses while posted on a constant watch.

4. Are the completed Observation Records submitted for the shift commander's signature at the end of every shift?

Finding: Not all observed Observation Records are signed by shift commander.

5. Does the mental health/health care staff visit the inmate every four hours? Are the visits documented on the Observation Records?

Finding: Mental Health staff do not document visits on Observation Records each 4 hours.

6. Are security staff documenting a visual check of the inmate every thirty minutes or as otherwise specified by the mental health watch order?

Finding: Time frames for some observed watches were out of time frames.

STINER UNIT

INMATE MANAGEMENT

1. Are searches of interior and exterior common areas conducted and documented?

Finding: Searches were observed being conducted but not entered into the correctional service journal.

REQUIRED SERVICES

1. Are applications stamped "Received" including the date on the reverse side?

Finding: Some viewed files just have a date stamp without the word "received".

2. Does the visitation staff maintain a permanent record log reflecting receipt and/or transfer of all inmate visitation files?

Finding: There are two logs present to account for incoming / outgoing inmate visitation files. There are no record of incoming visitation files since 02/2010.

3. Are inmates screened for allowable items?

Finding: Inmate in non contact visit was observed with pieces of plastic comb in holes in his ear

lobe. This was not addressed by security staff.

4. Are inmates strip searched by staff prior to exiting the visitation area?

Finding: Inmate from non contact visit was not stripped searched once the visit was completed.

5. Is court ordered visitation conducted on the 1st and 3rd Friday of each month?

Finding: Scheduled through DW secretary. Not scheduled on 1st and 3rd Friday of each month.

6. Do shift commanders tour visitation at a minimum of once per shift during visiting hours?

Finding: No Correctional Service Journal entries showing shift commanders touring.

7. During visiting hours, does the on-site duty officer tour visitation once per shift?

Finding: No Correctional Service Journal entries showing on-site duty officer touring.

8. Are Attorneys or their agents contacting the Warden or Deputy Warden at least 48 hours in advance and provide there name, date of birth and Bar number?

Finding: DW secretary stated she is unable to meet the 48 hour requirement.

STINER UNIT

9. Are court ordered visits documented in the inmate's visitation file?

Finding: Hendrix 210836 receives court ordered visits but does not have documented court ordered visits in his file.

10. Does the contraband officer maintain comprehensive records of the disposition of all contraband, physical evidence, unauthorized property and unclaimed property?

Finding: Blue Yard is logged. Destruction is out of date. Red Yard is not logged.

11. Does the Contraband Control Officer periodically review each case to determine whether criminal or disciplinary charges were filed?

Finding: Contraband Control Officer (Property officer conducts duties) is unsure of this requirement and does not conduct periodic reviews.

12. Were uniform shoes, boots and accouterments shined?

Finding: Observed boots were dirty.

13. Is the following guidelines followed: Class ""C"" trousers, as outlined on Attachment C, may be worn as outlined in 1.2.3.4.2. These ""B.D.U."" style trousers shall be worn only with military style

boots and shall be worn bloused, if designed to be bloused?

Finding: Staff wearing BDU style pants were not all bloused as directed.

14. Are uniform accouterments observed authorized under the provisions of this department order, and worn appropriately as prescribed within?

Finding: Some staff wearing B or A style uniform shirts did not have name tag on uniform shirt.

BUCKLEY UNIT

CLASSIFICATION

1. Review DI95 screen for C0301 and C0401 appointments. Are any out of date?

Finding: Review of DI 95 screens revealed cases that were past time frames for classification actions.

2. Does the CO IV supervising the Classification officer review all actions taken by the classification officer, review AIMS data input and ensure all time frames are being met?

Finding: The Unit COIV has not reviewed all actions taken by the classification officer; reviewed AIMS data input and ensured all time frames are being met.

3. Review the shared drive reports for DI59 and/or DI61 actions to ensure they are within time frames.

Finding: A review of the DI59 and/or DI61 AIMS screens indicates they are within time frames.

4. Review a random selection of actions based on information received during interviews or review batch screens. Are time frames met?

Finding: Time frames are not being met on all classification actions.

5. Does a COIV assign inmates to Education, Treatment and Work Based Education (WBE) programs in accordance with the inmate's individual Corrections Plan, the applicable facility priority ranking report(s) and actual vacancies in work assignments?

Finding: WIPP coordinator was unaware of the "capacity report" to determine where the job vacancies are at. Several job openings existed.

6. Determine if there are any inmate as "unassigned" in inmate work programs. Is there a valid reason for the inmate not being assigned to a work program?

Finding: WIPP Coordinator advised there are anywhere from 450 to 500 inmates unassigned in WIPP. Lack of available jobs was cited as the reason.

COUNT MOVEMENT

1. Does the Accountability Officer reject pre-printed count sheets?

Finding: Kitchen out count was preprinted, some written names were added and before being signed and turned in.

BUCKLEY UNIT

FOOD SERVICE

1. Are all doors/locking devices secured and locked when not in use?

Finding: During the inspection, some doors were observed unsecured.

2. Are equipment repairs handled correctly, and in a timely manner?"

Finding: Kitchen equipment repairs are not always completed in a timely manner. Lack of maintenance staff and awaiting parts are cited as the reasons for the delay of repairs.

INGRESS/EGRESS

1. Test system repetitively during course of inspection to determine if procedures are applied on a constant basis. Did staff consistently apply security protocols during the visit?

Finding: During the inspection of ingress/egress the following observation were made:

a. Not all food items were required to be carried through the metal detector.

b. One Officer was observed being allowed to step around the officer conducting the searches without the knowledge of the searcher.

c. The inspector was not required to carry food through the metal detector, nor was he challenges on items that may have not been authorized.

2. Does the assigned officer question each person attempting to enter the unit in regard to possession of contraband items?

Finding: The officer conducting the searches never asked anyone questions about items they may have been carrying and not disclosing, such as amount of money.

3. Does the officer consistently inspect incoming property for possible contraband?

Finding: The officers observed during the inspection do not consistently inspect property for possible contraband.

4. Does the officer maintain an appropriate flow control during periods of high traffic, allowing for ample time to inspect staff and property items during ingress / egress?

Finding: During shift change, only one officer was available to conduct ingress searches and was easily overwhelmed by the number of persons entering the unit.

5. Observe break areas and offices for personal property items that are not in compliance, or have not been authorized. Are the areas free of contraband / unauthorized property?

Finding: A glass bottle of hot sauce was observed inside the Buckley main control room during the inspection. While conducting inspections of other areas, there were several Styrofoam and hot cups that are not see through observed in different areas of the unit.

BUCKLEY UNIT

6. Does the officer ensure all food containers / packages are brought through the metal detector?

Finding: Not all food items were required to be carried through the metal detector.

7. Observe break rooms / lunch areas, or other locations where staff consume meals. Are unauthorized / excessive food items, utensils, or related meal items present?

Finding: A glass bottle of hot sauce was observed inside the Buckley main control room during the inspection. While conducting inspections of other areas, there were several Styrofoam and hot cup that are not see through observe in different areas of the unit.

8. Monitor access points to verify all staff, and associated personal property are searched prior to access being granted to the unit. Were all staff members searched thoroughly prior to entering?

Finding: Searches were inconsistent and ineffective.

9. Do assigned staff members inspect / search all personal property to include food items, and require applicable items to be cleared via the metal detector?

Finding: Not all food items were required to be carried through the metal detector.

10. Inspect unit ingress / egress points and determine if there are locations where staff can by-pass and/or defeat this procedure. Are the locations secure to the degree staff cannot by-pass the security station?

Finding: Staff entering the unit have the ability to walk past the tables in the lobby area where searches are being conducted. During high traffic periods, the search area is exceptionally vulnerable.

KEYS AND RADIOS

1. Does the inventory list all available keys, the total number of each on hand, along with the corresponding locking device each key will access?

Finding: The Master Key Inventory in Buckley Unit Main Control does not specify the total number of key sets authorized for the unit.

2. Does the inventory list all authorized key sets, including the number of keys on each ring, and the key set location?

Finding: There were twelve key sets available for review. On two occasions the number of keys on the inventory did not match the number of keys on the ring and the number stamped on the chit.

BUCKLEY UNIT

3. Does the number of keys on the key ring, key ring tag and the inventory coincide?

Finding: There were twelve key sets available for review. On two occasions the number of keys on the inventory did not match the number of keys on the ring and the number stamped on the chit.

4. During monthly inspections, are all keys and locking devices inspected for proper function, and damaged keys and locking devices fixed or replaced?

Finding: Two keys sets with one key each were observed with the key on each ring being broken and the lower portion of the key was missing.

5. Each time a key set is issued, or returned does the officer responsible make the appropriate entry in the Key and Credit Card Control sheet (Form 702-1) specifying at a minimum: Key number, date of issue/return, name of authorized staff member, initial of issuing staff member, name of staff returning key set and initial of staff receiving key set back?

Finding: Of the seventeen times the emergency keys were signed out, seven times there was no entry indicating the keys were returned.

6. Does each emergency key ring have a clearly visible color coded tag to identify the portals and/or buildings the key set will access?

Finding: Emergency key rings do not have a color coded tag in place. Only the compression device on the key ring is colored and in some case is hard to determine the color for the ring.

7. Does the staff member demonstrate the ability to obtain and utilize emergency keys? Randomly select a staff member from each unit and each shift and direct them to gain access to the emergency keys for a specific location and monitor their progress.

Finding: The staff member selected to perform an emergency key test had great difficulty in obtaining the requested emergency keys set and performed poorly when trying to access the request doors.

Per the unit Captain, the unit does not perform training simulations requiring staff members to acquire and utilize emergency key sets.

PERIMETERS AND TOWERS

1. Close custody units - Does the unit have an external sand trap which includes drainage and no visible signs of erosion?

Finding: The perimeter on the east side of the unit slope towards the unit allowing rain water run off water to erode under the exterior security fence. Some of the erosion was big enough for a person to crawl through unimpeded. The areas were repaired at the time on the inspection, but eroded areas are still evident and it appears the fill dirt was not compacted.

BUCKLEY UNIT

2. Close custody units - Does the unit have an electronic detection system in place that meets the requirements listed above?

Finding: a. While observing a swing shift officer conducting daylight Security Device Inspection of the Vindicator Alarm System, the Buckley Unit Chief of Security advised and demonstrated he had the ability to make it across the alarm area without activating the alarm system. There was no notification made to anyone and the Captain advised it was an old issue and everyone was aware of it.

b. The Captain stated he had elevated the issue to Norment in the past and was told to be quiet about it.

c. While conducting a nighttime lighting inspection, the Vindicator alarm system was tested again, where an inspector and the shift sergeant were able to cross the perimeter in different areas without activating the alarm.

d. The following day, Security staff members from the unit were observed testing the Vindicator Alarm System for other weaknesses. The security staff member advised they had located two additional areas where the alarm would not activate.

e. The above information indicates the Vindicator Alarm System does not function at a desired level to provide for adequate prison security for a close custody unit.

SECURITY DEVICES

1. Does the Chief of Security ensure SDI work order log repairs are made within time frames?

Finding: Some security device work orders have been pending for a considerable amount of time. Reasons cited for the delay were contract issue, waiting for parts to come in, funding and lack of maintenance staff.

2. Does the documentation demonstrate Deputy Wardens, Associate Deputy Wardens and Chiefs of Security spend a minimum of ten hours per week touring their unit?

Finding: The December 2010 monthly report for the Deputy Warden only had documentation indicting the Deputy Warden had completed two tours of the unit. The Unit Chief of Security claims to spend the require amount of time on the unit, but admitted he does not always completed the inspection/tour reports to ensure the time spent on the unit is appropriately documented.

3. Does the documentation support Deputy Warden's and Chief's of Security submit exception reports noting any deficiencies observed during their tours?

Finding: The tour inspection reports were not available for review. Captain advises he does not always complete the required reports all of the time.

BUCKLEY UNIT

TOOLS

1. Does the Chief of Security have a list of all authorized Tool Control Storage areas?

Finding: The Unit Chief of Security did not have a written list of tool storage areas, but rather spoke to the storage areas he was aware of. During the inspection it was evident the Chief of Security was unaware of the tools being stored to the Lock/Key office and tools and sharps in place in the medical unit.

2. Has the Chief of Security ensured a monthly reconciliation has been conducted of all authorized Tool Control Storage areas?

Finding: The Chief of Security does not ensure tool reconciliation is completed for the medical area of the Buckley Unit. The Unit Captain did not seem to be aware of the medical tool and sharps being stored on the Buckley Unit.

3. Are there any flammable / hazardous items stored within the authorized locations?

Finding: The tool room had spray paint and the key shop had spray LPS which is flammable when sprayed.

4. Are tools stored on a shadow board with shadow that closely resembles the tool?

Finding: The Lock/Key office does not have the tools shadowed. Tools are stored in tool box and contain some class "A" tools.

5. Are tools being signed out/in appropriately on the correct form? (Tool Check Out Form 712-4)"

Finding: Tools in the Lock /Key shop are not being signed out when they are used to do repairs.

6. Does the officer signing out the tools keep a copy of the completed form? (Tool Check Out Form 712-4)

Finding: There are no tool sign out forms in the Lock/Key office to keep on the person utilizing the tools.

7. Are the completed Tool Check Out Forms (712-4) kept on file in the tool room for the previous thirty days?

Finding: There are no tool sign out forms in the Lock/Key office on file for the last thirty days.

8. Did the person responsible for tool control ensure all tools were accounted for at the beginning and ending of the shift?

Finding: There was no indication if the Lock/Key Officer conducts a beginning and ending tool inventory in the Lock/Key tool control storage area.

BUCKLEY UNIT

9. Are unserviceable tools disposed of appropriately, as prescribed in D.O. 304 Equipment and Inventory System?

Finding: Tool Room Supervisor advised all unserviceable tools were destroyed by placing them in the compaor on the unit.

10. Does the Chief of Security or designee reconcile the Master Tool Inventory on a monthly basis?

Finding: The Chief of Security or designee does not reconcile the Master Tool Inventory on a monthly basis for the medical area of the Buckley unit. Unit Chief of Security seemed to be unaware of the sharps and tools being stored in the medical area of the Buckley Unit.

11. Are Class A tools stored in an area separate from Class B tools, on an individual hanging device and shadow, to avoid confusion / misidentification?

Finding: Tools in the Lock/Key office had A & B tools combine in a tool box in the office and did not have any shadows.

12. Are Class A tools stored in tool pouches / boxes clearly marked, and shadowed within the tool carrier, for ease of inventory and visual monitoring?

Finding: Tools in the Lock/Key office had A & B tools combine in a tool box in the office and did not have any shadows.

13. Does the Tool Officer maintain a list of all tools checked out during their shift to aid in immediate accountability?

Finding: The Lock/Key officer does not sign out the tools to ensure for immediate accountability, if it is needed.

14. Are master inventories completed monthly, with appropriate reconciliation documentation, and forwarded to the Chief of Security via the Health Services Administrator?

Finding: Monthly tool reconciliation of the heath services area is not completed and forwarded to the Unit Chief of Security.

BUCKLEY UNIT

DETENTION SERVICES

1. Inspect detention facility (including cells). Is the area clean and sanitary?

Finding: Building 4 D pod is handling Detention Unit overflow and is being operated as a detention Unit. The showers in the pod area are not clean and have mold growing in the showers. Some shower doors will not open.

2. Observe a meal service. Are meals served in the same manner as general population (food quality)?

Finding: Meals are delivered to the pod are in Styrofoam trays. Trays are not delivered in a temperature control box and there is no way to track the temperatures of the food when delivered. Cold and hot items are being served in the same tray.

3. Review a month of logs and records. Are records complete? Are inmates receiving required notifications and services?

Finding: During the review of records and performance inspection, it was noted inmates are not receiving all required service on a consistent basis. Inmates are missing showers, recreation, phone calls, hair cuts, etc.

It was also noted inmates are not allowed access to razors or clippers when assigned to this area and several inmates were not in grooming compliance.

4. Review a random selection of Individual Inmate Detention Record, form 804-3. Do the logs include information listed under 1.4-1.4.2?

Finding: During the review of records and performance inspection, it was noted inmates are not receiving all required service on a consistent basis. Inmates are missing showers, recreation, phone calls, hair cuts, etc.

INMATE SERVICES

1. Does the Unit have a Post Order #43 Urinalysis Security Officer?

Finding: The unit does not have a post order for the Urinalysis Security Officer.

INMATE MANAGEMENT

1. Are staff aware of their responsibilities if an Informal Complaint or Formal Grievance at thier level that describes activity that may be in violation of the Sexual Assault Procedure?

Finding: Staff members interviewed did not seem to be aware of the responsibilities if an Informal Complaint or Formal Grievance at any level which describes an activity may be in violation of the Sexual Assault procedure.

BUCKLEY UNIT

2. Are staff members aware of the required time frames and the action that is taken in the event the time frame is violated?

Finding: Staff members interviewed did not seem to be aware of the required time frames and the action that is taken in the event the time frame is violated.

3. Does the log reflect that grievances were addressed by the unit Deputy Warden within 15 days?

Finding: The log did not have any grievances filed for December 2010 or January 2011. During the inspection, grievance documents filed by inmates for those two months were observed in different areas of the unit.

4. Does the Disciplinary Hearing Officer's finding of guilt contain a statement detailing what evidence was relied upon that specifically supports the finding of guilt?

Finding: During the inspection of the record, it was noted there were two different captains performing duties of DHO. One Captains comments were excellent. The comments made by the other Captain were lacking statements detailing what evidence was relied upon that specifically supports the finding of guilt.

5. Does the Unit Deputy Warden and Warden have a copy of the monthly report submitted by the Disciplinary coordinator?

Finding: The monthly report indicated the memo is generated and sent to the Unit Captain. There was no information available to demonstrate the report is sent to the Unit DW.

REQUIRED SERVICES

1. Of the files reviewed, does every 911-1 have the potential visitors full name, date of birth, address, phone number and relationship filled out?

Finding: Of the ten records reviewed, five records did not contain all of the required information on form 911-1 visitation list.

2. Are applications stamped "Received" including the date on the reverse side?

Finding: Of the files reviewed, none of the electronic copies received in the files were stamped "Received" including the date on the reverse side.

3. By the 28th of each month, does the visitation staff submit a memorandum listing all inmates currently on non contact visitation to the Warden?

Finding: Visitation staff reported they do not produce the monthly report for the Deputy Warden.

BUCKLEY UNIT

4. Did all security staff have assigned hand-cuffs and chemical agents during inspections?

Finding: Mail/Property Officer did not have he required equipment during the inspection.

RAST UNIT

CLASSIFICATION

1. Review DI95 screen for C0301 and C0401 appointments. Are any out of date?

Finding: One COIII appointment is out of date.

COUNT MOVEMENT

1. Does the institution have an approved protocol for "red lining" a specific bed?

Finding: Unit is using the "red lining" tag on the count board for maintenance items such as toilet repair without administration notifications, cells were found off line for over one week.

2. Does the unit have a picture board that is updated and matches the unit inmate count?

Finding: The unit's picture board is out of date and is missing 69 pictures.

FOOD SERVICE

1. Are all inmate workers inspected for personal hygiene, illness, open sores or cuts before being allowed to perform duties in the kitchen?

Finding: Staff not documenting inspection of P.M. crew in the Service Journals.

KEYS AND RADIOS

1. Does the unit have an accurate Master Key Inventory * Review Master Key Inventories and associated documentation for past 12 months.

Finding: The Master Key Inventory was off by three keys sets in non-restricted box and one key set in the restricted key box.

2. Does the Master Key Inventory specify the total number of key sets authorized for the institution / unit?

Finding: The Master Key Inventory was off by a total of three key sets.

3. Does the inventory list all available keys, the total number of each on hand, along with the corresponding locking device each key will access?

Finding: The Inventory was listing three extra key sets have been pulled making the total number inaccurate.

RAST UNIT

4. Does the inventory match up with existing key stock on hand? Compare inventory with available keys.

Finding: When compared with the key sets on hand it was discovered the inventory had three extra key sets.

5. Does the unit have a monthly report on file showing the inspection and inventory of keys/key rings, emergency keys/key rings and locking devices for the past twelve months?

Finding: The monthly reports on hand for the past twelve months the totals on the monthly reports were off November, December, and January.

PERIMETER AND TOWERS

1. Close custody units - Do the lights in the adjacent zones to either side of the alarmed zone activate when an alarm condition triggers the quarts lights associated with the alarmed zone? Interview random staff assigned to the control room to determine action taken when an alarm is activated."

Finding: Lights activate but 2 in zone 13 are out and 1 in zone 5 is out.

SECURITY DEVICES

1. Are the security device inspections conducted accurately, timely and adequately documented to be in compliance with department written directives?

Finding: When a security device inspection is conducted it is not adequately documented i.e. not including the IR number.

2. Were appropriate entries made in the Correctional Service Journal?

Finding: Observed radio remote base stations not functioning, sliders in both dorms, and noted the fire alarm system is not functional these items are not being entered in the Correctional Service Journal.

3. If deficiencies were discovered, were all appropriate documents submitted (information report and work order)?

Finding: Monday during the inspection the slider doors in both dorms where not operating correctly. Thursday it was observed no IR or WO had been submitted.

4. When deficiencies are noted, does all documentation contain the cross referenced information report number from the corresponding information report(s)?

Finding: The SDI list provided by the COS was used to check journals entries containing cross referenced IR etc. the journals did not contain the IR number.

RAST UNIT

5. Were deficiencies requiring immediate attention addressed as "emergencies" and appropriately managed by the Chief of Security?

Finding: The Chief of Security was with me on Monday during the inspection when we noticed the slider doors having to be manually opened and shut by the inmates and staff. The deficiency was not reported nor appropriately managed by the Chief of Security.

6. Does the Chief of Security maintain a current file of all documentation relating to inspections, maintenance requests, follow-up actions, and preventive maintenance programs within the institution/unit?

Finding: The Chief of Security does maintain a list but the list is not current.

7. Does the Chief of Security ensure SDI work order log repairs are made within time frames?

Finding: Deficiencies noted on Monday and still have not been identified or anything done three days later.

8. Do the duty officer and EEO Liaison submit reports to the Wardens Office?

Finding: There is no evidence of the EEO Liaison submitting reports to the Wardens office.

9. Do interviews with staff indicate if the EEO Liaison conduct tours or attend briefings/meetings each month on the Unit?

Finding: There is no evidence of the EEO Liaison conducting tours or attending briefings/meets each month on the unit.

10. Does a review of random EEO Liaison reports indicate the assigned EEO liaison is making required tours?

Finding: There were no reports to review.

TOOLS

1. Has the Chief of Security ensured a monthly reconciliation has been conducted of all authorized Tool Control Storage areas?

Finding: There is a monthly reconciliation but it does not address any medical tools.

2. Are tool stored in a secure area, inaccessible to inmates?

Finding: The Hazardous Material locker was unsecured during inspection with inmates all around and the sanitation tool area is in an open area with no accountability.

RAST UNIT

3. Are there excess amounts of tools stored on the unit?

Finding: There are large amount of brooms and mops unaccounted for in various locations, wheel chair in the vehicle sally port closet that has been there for months no one has any idea where it belongs.

4. Are there any flammable / hazardous items stored within the authorized locations?

Finding: During the inspection it was noticed that there was paint and other chemicals some said caustic stored in the vehicle sally port closet.

5. Does the storage area comply with fire and safety codes?

Finding: A closet does not meet fire or safety codes for any flammable or hazardous item.

6. Are tools being signed out/in appropriately on the correct form? (Tool Check Out Form 712-4)

Finding: Tools in the key area are not being signed out; a ball ping hammer and two stamps sets out when the inspection took place.

7. Does the person who signed out/in the tools keep a copy of the sign out sheet in there possession while they have the tools signed out?

Finding: The officer did not have a copy of the sign out sheet on hand.

8. Does the officer signing out the tools keep a copy of the completed form? (Tool Check Out Form 712-4)

Finding: The key control officer does not sign out his tools and does not have copy of the completed form.

9. Are the completed Tool Check Out Forms (712-4) kept on file in the tool room for the previous thirty days?

Finding: There is no record of the tools being signed out the key tool storage area. A review of thirty days of forms from the food service area showed 6 of them not signed.

10. Did the person responsible for tool control ensure all tools were accounted for at the beginning and ending of the shift?

Finding: The Tool Control Officer is posted before the end of shift so there is no ending shift inventory. The Key Control Officer does not account for all tools at the beginning or ending of each shift.

RAST UNIT

11. Are inventory sheets placed in all areas where tools are stored within the authorized location?

Finding: There are no inventories for sanitation tools in all buildings except dorms.

12. If a tool is removed permanently, is the shadow board updated immediately?

Finding: In food service tool storage area the shadow board has a silhouette of a cable that is not on the inventory.

13. Do nursing staff inventory and account for tools assigned to the medical areas?

Finding: There is no record of the tools being inventoried or accounted for on a regular basis only when accessed.

14. Do dental staff inventory and account for tools assigned to the dental areas?

Finding: There was no documentation to review.

15. Are tools, and instruments in long term storage sealed in tamper proof containers, locked with a break away seal, and the seals checked daily by staff responsible for conducting inventories?

Finding: No evidence that a daily seals were checked.

16. Where these sealed containers are used for storage, are the boxes opened once per month for inventories, and or if the seal is discovered to have been broken?

Finding: There was no evidence that boxes were opened once per month.

17. Is only the minimum number of syringes, needles, or laboratory supplies kept on-site or in storage? (Four days supply for institutions with a pharmacy on-site, or seven days for remote locations.)

Finding: There was no documentation on hand to review.

18. Are health services staff conduct a tool inventory and reconciliation of all tools, instruments, and portable sharps disposal containers at the beginning and end of each shift?

Finding: There was no evidence that health services staff conduct a tool inventory and reconciliation of all tools at the beginning and end of each shift.

19. Are the tool inventories conducted in tandem with a uniformed security officer, or if an officer is not immediately available, a second health services employee?

Finding: In interview with security staff they are not involved in conducting inventories with the health services staff.

RAST UNIT

20. Are master inventories completed monthly, with appropriate reconciliation documentation, and forwarded to the Chief of Security via the Health Services Administrator?

Finding: The Chief of Security has no documentation on health service tool inventories.

21. Are missing / lost health services tools or instruments reported immediately to the Shift Commander, with notifications made to the Health Services chain of command up to Division Director of Program Services?

Finding: No inventory on hand.

22. Are all kitchen tools checked in / out using Tool Check Out forms, which are kept on-site for 30 days by the Food Service Supervisor?

Finding: A review of the tool check out forms for thirty days revealed 6 of them where not signed.

DETENTION SERVICES

1. Review a month of logs and records. Are records complete? Are inmates receiving required notifications and services?

Finding: There is no mention of inmates receiving medical or recreation services.

2. Review a random selection of Individual Inmate Detention Record, form 804-3. Do the logs include information listed under 1.4-1.4.2?

Finding: Reviewed 804-3 and there was not record of inmates being offered recreation or medical services.

3. Review records; Are mental health staff conducted daily evaluations of the inmates on watches?

Finding: Reviewed records and there is no evidence of mental health staff conducting daily evaluations.

4. Review records; Are medical health care staff completed health and welfare checks at least once each day during non-business hours.

Finding: During document review records show no evidence of medical health care staff completing health and welfare checks at least once each day during business or non-business hours.

5. Review historical records for proper documentation. Does the record indicate staggered observation times within the required time frames to include at shift change?

Finding: In review of documentation it was discovered observation times where not staggered.

RAST UNIT

6. Review historical records for proper documentation. Does the record indicate staggered observation times within the required time frames to include at shift change?

Finding: In review of documentation it was discovered observation times were not staggered.

7. Review the records; have the mental health care staff or medical health care staff conducted daily evaluations as required?

Finding: There is no evidence of mental health or medical care staff conducting daily evaluations as required.

8. Are meals served according with the policy and any instructions from the health care staff?

Finding: Documentation on inmate Greathouse 1/14/11 did not indicate that he received any meals.

9. Does the mental health/health care staff visit the inmate every four hours? Are the visits documented on the Observation Records?

Finding: No record of mental health care staff visiting every four hours.

INMATE MANAGEMENT

1. Does the disciplinary coordinator initiate an objective investigation within 24 hours of receiving the ticket?

Finding: Disciplinary Coordinator takes up to 5 days waiting on paperwork before initiating an objective investigation.

2. Are Class C Violations disposed of within five work days of the filing date of the violation?

Finding: It is taking between 10-20 days to dispose of Class C Violations.

BACHMAN UNIT

CLASSIFICATION

1. Does the inmate's assigned COIII notify the inmate of the Central Office Classification action and notate in AIMS when the inmate has been notified and of the inmate's right to Appeal?

Finding: Inmates are given an appeal form when the COIII makes the recommendation for Max Placement instead of after being notified of Central Office Classifications decision.

FOOD SERVICE

1. Does medical provide the unit with a list of all inmates assigned to work in the Kitchen?

Finding: No, the WIPP Officer finds the information by checking AIMS

2. Review AIMS screens for all inmates assigned to the kitchen. Are all inmates assigned to the kitchen medically cleared?

Finding: One AM Kitchen Worker was not medically cleared to work. He had been cleared to work in the kitchen on 1/15/11 but his status changed on 1/19 with no notification to the unit of the change.

3. Are inmates signing for his/her diet?

Finding: Inmates do not always sign the diet sheet when receiving their meals. The Food Service worker passes the Diet Book out to the inmate but does not verify the inmate signed for his diet when the book is returned.

4. Are equipment repairs handled correctly, and in a timely manner?

Finding: Two ovens have been inoperable for two months waiting for parts.

5. Does all of the food being transported remain in the proper temperature safe zone?

Finding: The dinner meal was at Detention for thirty minutes before it was served - the cart used for the hot tray was not operational.

INGRESS/EGRESS

1. Does the assigned officer question each person attempting to enter the unit in regard to possession of contraband items?

Finding: Ingress Officer did not ask each employee if they had any contraband in their possession.

BACHMAN UNIT

2. Does the officer maintain an appropriate flow control during periods of high traffic, allowing for ample time to inspect staff and property items during ingress / egress?

Finding: Ingress Officer did not control the ingress process - each employee entering determined how and when they were cleared to enter the unit.

KEYS AND RADIOS

1. Each time a key set is issued, or returned does the officer responsible make the appropriate entry in the Key and Credit Card Control sheet (Form 702-1) specifying at a minimum: Key number, date of issue/return, name of authorized staff member, initial of issuing staff member, name of staff returning key set and initial of staff receiving key set back?

Finding: Keys returned to Main Control at shift change were not signed back in or placed back into to the key boxes until one hour after shift change.

PERIMETER AND TOWERS

1. Minimum custody units- Does the Unit maintain sand traps to provide an indication of escape path or fence tampering?

Finding: Sand trap adjacent to the outer perimeter fence is hard packed.

SECURITY DEVICES

1. Were appropriate entries made in the Correctional Service Journal?

Finding: Entries did not include IR or work order numbers.

2. If deficiencies were discovered, were all appropriate documents submitted (information report and work order)?

Finding: Work Orders were submitted but not Information Reports.

3. When deficiencies are noted, does all documentation contain the cross referenced information report number from the corresponding information report(s)?

Finding: Entries did not include IR or work order numbers.

4. Does the Chief of Security maintain a current file of all documentation relating to inspections, maintenance requests, follow-up actions, and preventive maintenance programs within the institution/unit?

Finding: The COS could not speak to or present historical data in reference to tracking security device deficiencies. There is a current log explaining the latest delay in repairing a security device but there is no historical data for tracking the delays.

BACHMAN UNIT

TOOLS

1. Are tools stored on a shadow board with shadow that closely resembles the tool?

Finding: The Key Ring Crimper which is a Class A tool is stored in a locked drawer in the Key Control Office and it is not shadowed.

2. Does the person who signed out/in the tools keep a copy of the sign out sheet in their possession while they have the tools signed out?

Finding: The Work Crew Officer does not keep a copy of the 712-4 form on him - he transfers the information to the out count form.

3. Does the officer signing out the tools keep a copy of the completed form? (Tool Check Out Form 712-4)

Finding: The Work Crew Officer does not keep a copy of the 712-4 form on him - he transfers the information to the out count form.

4. Are all tools color-coded using the applicable unit's assigned color?

Finding: The color-coding is worn off a majority of the tools.

5. Are Class A tools stored in tool pouches / boxes clearly marked, and shadowed within the tool carrier, for ease of inventory and visual monitoring?

Finding: The Key Control Tool box contains Class A tools is not shadowed.

6. Are master inventories completed monthly, with appropriate reconciliation documentation, and forwarded to the Chief of Security via the Health Services Administrator?

Finding: The COS does not receive a copy of Medicals master tool inventory.

DETENTION SERVICES

1. Review a random selection of post journals. Are command and services staff visiting as required and/or needed (religious, medical/mental watch, counseling staff included)?

Finding: The officer doesn't always log when command staff and services staff visit the inmates in Detention.

2. Review a random selection of Individual Inmate Detention Record, form 804-3. Do the logs include information listed under 1.4-1.4.2?

Finding: The Individual Inmate Detention Records do not contain all of the required information, i.e., medical, CO III, cell cleaning, state issue, laundry.

BACHMAN UNIT

INMATE SERVICES

1. Are random U/As conducted at different times on different days of the week to keep from setting a pattern?

Finding: While dates are random, there is a pattern of one officer drawing all U/A's at one time.

INMATE MANAGEMENT

1. Does the grievance log reflect the grievance appeal was submitted to the warden within time frames and was the grievance responded to within time frames?

Finding: All required information was not entered in the Grievance Log.

2. Observe a search of an inmate's living area. If the inmate was not present, was the absence explained in the correctional journal and unit search log?

Finding: Officers were not aware of the requirement to log the reason for the inmate's absence during a search of his living area.

REQUIRED SERVICES

1. Randomly select 10 files for review. Does each file have a 911-1 visitation list?

Finding: One file did not contain a 911-1 form.

2. Are applications stamped "Received" including the date on the reverse side?

Finding: Not all visitation applications reviewed were stamped "Received".

3. Is the visitation schedule posted in the registration, visitation and inmate housing areas?

Finding: The visitation schedule is not posted at registration or in the visitation rooms.

4. Are legal boxes labeled to indicate total number of boxes inclusive of those in storage?

Finding: Of the three inmates who have legal boxes in storage, only one set of boxes were labeled correctly.

5. In those instances where an inmate does not packing his/her property, does the inventory indicate receipt of each item by cross-checking the "Receiving" column?

Finding: Not all property forms were cross-checked.

BACHMAN UNIT

6. Do staff audit property files on a random basis?

Finding: The officer says she rarely audits the property files.

7. Are appropriate Post Orders for property updated to within 90 day of the effective date of this Department Order? (April 21, 2008) Revised Oct 2, 2010

Finding: The last revision of the post order was in January/2010.

8. Did all security staff have assigned hand-cuffs and chemical agents during inspections?

Finding: Two officers did not have their assigned hand-cuffs or chemical agents in their possession.

9. Were uniforms observed to be clean, in good condition, and devoid of stains or patched areas?

Finding: Officers were observed wearing faded trousers.

10. Are all jackets observed to have Department patches on both shoulders, a replica of the breast badge over the left breast pocket and the officer's last name embroidered over the right breast pocket?

Finding: Some officers were observed wearing jackets without a replica of the breast badge.

EAGLE POINT/SUNRISE

CLASSIFICATION

1. Has the COIII, COIV, Deputy Warden, or designee initiated a reclassification action on the DI99 and the DT08 10 screen for custody discretionary overrides?

Finding: The COIV did not include comments on the DT08 screen.

2. Have the COIV and COIII received the required initial and refresher training?

Finding: COIV had not taken a refresher course at time of inspection.

COUNT MOVEMENT

1. Does the shift supervisor or commander review and sign all formal count sheets?

Finding: Shift Commander is not always signing all formal count sheets.

FOOD SERVICE

1. Review AIMS screens for all inmates assigned to the kitchen. Are all inmates assigned to the kitchen medically cleared?

Finding: Not all of the inmates assigned to kitchen were medically cleared.

INGRESS/EGRESS

1. Does the officer ensure all food containers / packages are brought through the metal detector?

Finding: Not all food containers/packages were cleared through the metal detector.

2. Does the officer question any manufactured food items sealed in original packaging, causing difficulty in screening the contents inside?

Finding: Several items sealed in original packaging (bag of chips, candy bars) were allowed entry without the officer questioning about them.

3. Are all staff members required to pass through a metal detector, and clear the scanner, prior to gaining access to the unit?

Finding: On 1/26/11 persons entering unit did not clear the metal detector before gaining access to Sunrise. The staff cleared the metal detector at Eagle Point then drove to Sunrise.

EAGLE POINT/SUNRISE

4. Do assigned staff members inspect / search all personal property to include food items, and require applicable items to be cleared via the metal detector?

Finding: On 1/26/11 and 1/27/11 personal property was not searched nor cleared the metal detector at Sunrise.

KEYS AND RADIOS

1. Are all emergency key rings clearly delineated as such, and stored in the Institutional armory or in the unit armory for units not closely located or in a secured control room for units without an armory, separately from other key sets for ease of identification and timely access?

Finding: Emergency key inventory does not coincide with actual keys. Inventory listed number, but the number did not match the key set. The key set was only labeled with the alpha code.

PERIMETER AND TOWERS

1. Minimum custody units- Does the Unit maintain sand traps to provide an indication of escape path or fence tampering?

Finding: Inside interior fence contains hard dirt which makes tracks not easily visible.

2. Minimum custody units-Is the Outdoor visitation space enclosed with an 10 foot high (Minimum) fence with a coil of 30" five point concertina razor ribbon mounted at the top of the fence?

Finding: Outdoor visitation space has no razor ribbon mounted at the top of fence.

TOOLS

1. Are tools stored on a shadow board with shadow that closely resembles the tool?

Finding: Three cutting boards stored at Eagle Point's kitchen tool room are engraved but are not shadowed.

2. Are the completed Tool Check Out Forms (712-4) kept on file in the tool room for the previous thirty days?

Finding: All areas of the tool checkout form are not always completed. Names, badge numbers and signatures are sometimes omitted.

3. Are inventory sheets placed in all areas where tools are stored within the authorized location?

Finding: At Eagle Point, there was no inventory posted in the area where A & B tools were stored.

EAGLE POINT/SUNRISE

4. Are all tools permanently engraved/stamped and color-coded?

Finding: At Sunrise, all tools are not engraved. A paint roller and several brooms were not labeled.

5. Does the Tool Officer reconcile all tools issued to inmates at the end of the work day, prior to releasing inmates back to the yard?

Finding: At Eagle Point, tools are not reconciled at the end of the work day.

6. Are the kitchen tools maintained on a master inventory system, as outlined in sections 712.02, subsection 1.1 through 1.8 (Instrument sections 60 to 104)

Finding: At Eagle Point, a pastry blender was engraved and shadowed as #48. However, it could not be located on the master tool inventory. #48 was shadowed as a scooper. Oven mitt #120 was not labeled. 4 sets of extra oven mitts were in tool area but were not on master tool inventory.

INMATE SERVICES

1. Does the Unit have a Post Order #43 Urinalysis Security Officer?"

Finding: At time of inspection, no post order #43 could be found.

INMATE MANAGEMENT

1. Review 30 days of search logs and records. Was there a daily record of search reports?

Finding: There is no daily record of strip searches recorded in log. Only random documentation is used.

2. Are Class C Violations disposed of within five work days of the filing date of the violation?

Finding: Class C violations are disposed of within 7 working days.

REQUIRED SERVICES

1. Is the sender of correspondence tapes on the Inmate's approved visitation list?

Finding: If correspondence tapes are received, the officer does not check AIMS to see if sender is on inmates approved visitation list.

2. Were all observed moustaches, side-burns, and goatee's meeting policy requirements?

Finding: Not all observed moustaches were in compliance with policy.

EAGLE POINT/SUNRISE

3. Were non-uniformed staff dressed within the guidelines of this policy?

Finding: Not all non-uniformed staff were dressed according to policy. Open-toe shoes were seen worn.

BARCHEY UNIT

CLASSIFICATION

1. Review the AIMS DT08 10 classification screen. Are DNHW reviews being conducted during each classification action?

Finding: No DNHW review comments on DT08 screen

2. Randomly select an adequate number of inmates assigned to Inmate Work Programs and review the inmates' AIMS files. Are the inmates' work assignments commensurate with the custody level of the inmates?

Finding: Medical porter has drug disciplinary.

SECURITY DEVICES

1. Do interviews with staff indicate if the EEO Liaison conduct tours or attend briefings/meetings each month on the Unit?

Finding: No tours being conducted. Staff are unaware who their EEO representatives are.

INMATE SERVICES

1. Does the Unit have a Post Order #43 Urinalysis Security Officer?

Finding: No post order for UA officer.

2. Review appropriate logs demonstrating if a paralegal has been to the Unit. Does a Paralegal visit the unit?

Finding: No logs indicated the presence of the paralegal on the unit.

3. Has the Legal Access Monitor ever visited the Unit to verify work performed by Paralegals, Ensure contract compliance, review activity logs?

Finding: No logs indicating the presence of the legal access monitor on the unit.

INMATE MANAGEMENT

1. Are searches conducted according to the steps outlined above?

Finding: Staff do not always strip search inmates when conducting UA's.

BARCHEY UNIT

REQUIRED SERVICES

1. Are property files maintained in terminal digit order?

Finding: They are in numerical order

2. Were non-uniformed staff dressed within the guidelines of this policy?

Finding: Observed three COIII's wearing tennis shoes.

COMPLEX

COUNT MOVEMENT

1. Is there an Institutional Order for Inmate Accountability that includes the required items?

Finding: Not all of the required items are addressed in the Institutional Order.

2. Does the Institutional Order specify the requirements of the master pass system?

Finding: Not all of the required items are addressed in the Institutional Order.

KEYS AND RADIOS

1. If inmates are authorized to possess keys, is the possession of the keys authorized in writing by the Warden, Deputy Warden or Administrator. (Question inmate for written authorization when in possession of keys)

Finding: During the inspection, inmates were observed in possession of keys. There were no written authorizations signed by the Warden, Deputy Warden or Administrator.

2. If inmates are possession of keys does the complex key control officer have copies of the written approval for inmate to have possession of keys?

Finding: The Key Control Officer does not have a file on written authorizations for inmates to possess keys.

3. Does the Key Control Officer maintain a file which demonstrates the Warden or designee approves of all key duplication in written format?

Finding: The Institutional Order authorizes the Deputy Warden to approve key duplications. There was no file to indicate who authorized any key duplications for the complex or the units.

4. Are all duplicated emergency key rings authorized by the Complex Warden or designee?

Finding: Key duplications are not authorized be the Warden or designee and there were no documents on file to review.

SECURITY DEVICES

1. Does the Chief of Security ensure SDI work order log repairs are made within time frames?

Finding: PPS is required to ensure repairs are made within the appropriate time frames.

2. Does the duty officer and EEO Liaison submit reports to the Wardens Office?

Finding: The EEO Liaison does not submit reports to the Warden.

COMPLEX

3. Do interviews with staff indicate if the EEO Liaison conduct tours or attend briefings/meetings each month on the Unit?

Finding: During the inspection, it was discovered the EEO Liaison does not conduct tours or attend briefings/meetings each month on the Unit

4. Does a review of random EEO Liaison reports indicate the assigned EEO liaison is making required tours?

Finding: There were no reports from the EEO liaison to review.

TOOLS

1. Are there excess amounts of tools stored on the unit?

Finding: Complex Canine area has a large supply of unnecessary tools. The last tool check was October 01, 2010.

2. Is there an established system of accountability for tools stored in the authorized area?

Finding: Canine and Water Treatment Plant are non-compliant

3. Does the person who signed out/in the tools keep a copy of the sign out sheet in their possession while they have the tools signed out?

Finding: Fleet is non compliant

4. Did the person responsible for tool control ensure all tools were accounted for at the beginning and ending of the shift?

Finding: Canine and Water Treatment Plant are non-compliant.

5. Are all tools color-coded using the applicable unit's assigned color?

Finding: Fleet and water treatment plant do not follow the IO.

6. Are all tool inventories logged into the appropriate Correctional Service Journal by those staff who conducted the inventories?

Finding: Canine and Water treatment plant are non-compliant, no records.

7. Does each inmate receiving a tool keep a copy of the Tool Checkout Form on their person at all times when using the tool, and return the copy to the Tool Officer when turning the tool in?"

Finding: Fleet is non-compliant.

COMPLEX

WEAPONS

1. Review entrance sign-in / sign-out logs. Are only authorized staff members accessing the Armory area?

Finding: Canine Handlers are not included in the list of staff authorized to enter the Armory, but do so routinely to access the narcotics safe for training aides.

2. Do staff members authorized to enter the armory maintain security, safety and sanitation of the armory and ensure the armory is used for weapons storage only?

Finding: A safe in the armory contains narcotics for training narcotics canines.

3. Interview the Complex Major and determine if a security seals have been broken. If so, were reports and inventories completed as required?

Finding: Narcotics canine handlers enter the armory on a routine basis and do not write an IR or conduct an inventory.

4. Are door seal numbers being properly logged in the correctional journal?

Finding: Door seals are not being routinely logged into the Correctional Officers Journal to demonstrate the door seals have been check and verified.

5. Is an accurate inventory of all assigned firearms, operational ammunition, chemical agents and other equipment being completed weekly using the Weekly Inventory, form 716-3

Finding: The Weekly inventory of all assigned firearms, operational ammunition, chemical agents and other equipment is not being completed weekly using the Weekly Inventory, form 716-3. The Inventory is being completed on the daily form.

6. Are staff members who are checking the seal on the DART locker at the beginning of each work shift and its condition documenting their findings in a Correctional Service Journal?

Finding: Complex and Morey Unit are the only units with DART lockers. Neither area logs the Security seal nor is tag number in a Correctional Services journal to demonstrate the DART locker being checked during each work shift.

7. Is there an existing system in place directing how staff members account for the seals used on the DART Locker?

Finding: Staff are not in compliance with DO 716.

COMPLEX

8. Verify inventories as required. Check 180 days. Have all inventories been conducted and are complete?

Finding: The Armory has no Correctional Service Journals for records to be kept in.

9. Determine if the Complex maintains stun devices. If so, are they only issued to security staff trained in their use and as outlined in the applicable IO?

Finding: Not in compliance.

10. Determine if the Warden has developed an IO. If so, does it include the ERP, fire evacuation plans, response to bomb threats and the local requirements for section 706.03

Finding: The IO for this area is outdated.

INMATE SERVICES

1. Does the Institution and Post Order address time limits?

Finding: The required Institutional order is out of date.

REQUIRED SERVICES

1. Is there an institution order for inmate mail addressing: outgoing and incoming mail; Inter-relation mail; mail room operations and mail contraband control dated within 90 days of this department order? (February 26, 2010)

Finding: The Institution Order for this area has not been updated as required.

**ASPC LEWIS FINAL ENVIRONMENTAL
REPORT**

**ENVIRONMENTAL OBSERVATIONS
ASPC-LEWIS ANNUAL INSPECTION
JANUARY 28, 2011**

MOREY UNIT

FOOD SERVICE

1. Observe the external area and doorways in the Kitchen. Has the unit taken measures to prevent rodents from entering the kitchen?

Finding: No traps in any observed areas.

2. Is inmate extra clothing kept stored neatly in a separate area?

Finding: Inmates jackets stored in a pile on racks in the back of the kitchen.

3. Are the walk-ins and dry storage areas clean with no items being stored in open containers or stored on the floor or under the evaporators?

Finding: Rack with food stored under evaporator in walk-in refrigeration.

4. Are items in the walk-ins and dry storage stored correctly? (Leftovers should be <40 degrees and logged, raw items on the bottom shelf, all items dated when received, First In First Out, etc.)

Finding: Eggs stored in walk-in refrigerator with no date.

5. Is there a sanitation log on the dish machine?

Finding: No sanitation log on machine.

6. Are pots and pans being washed in a three part sink with appropriate sanitizer in the final rinse?

Finding: Final rinse sink did not have sanitizer/proper amount of sanitizer.

PERIMETER AND TOWERS

1. Inspect perimeter fencing, detection systems, sand traps, concertina wire, and other deterrents for proper function and installation. Are all perimeter fencing, detection systems, sand traps, concertina wire, and other deterrents in good working order?

Finding: Lights 12, 14, 42 and 43 not activating when zone activated.

MOREY UNIT

2. Inspect perimeter sand traps and evaluate consistency of material. Does the sand trap produce a visible V'ed track?

Finding: Most of perimeter is hard packed.

INMATE MANAGEMENT

1. Is the yard neat, clean and free of trash and weeds?

Finding: Weeds between and behind buildings.

2. Is there a record demonstrating 704 inspections have been completed?

Finding: No record observed during the inspection.

3. Are infrequently used rooms, or other storage locations clean, and free from debris?

Finding: Trash observed in various unused rooms (i.e. Chow hall observation room).

4. Are inmates in compliance with grooming standards?

Finding: Inmates observed with beards that were too long and also some inmates observed with goatees.

5. Are inmates wearing ID cards as expected, in the upper left quadrant of their shirts?

Finding: Very few inmates were even wearing ID's.

6. Do inmates have excess property in their living areas?

Finding: Excessive property observed in living areas.

7. Do inmates wear all clothing items correctly?

Finding: Clothing observed baggy and pants sagging.

8. Are recreational or other unit activities integrated or segregated?

Finding: Caucasian on Hispanic volleyball game observed.

9. Are staff members in main entrance overwhelmed at shift change?

Finding: Staff unable to control main entrance during shift change.

MOREY UNIT

10. Is there evidence unit security functions are being provided attention by officers?

Finding: Staff observed shortcutting pat searches (i.e. stopping at elbow and knees while patting).

11. Are officers conducting escorts appropriately?

Finding: Staff in MDU observed doing one-on-one escorts and staff observed walking in front of inmates while escorting across the yard.

STINER UNIT

FOOD SERVICE

1. Observe the external area and doorways in the Kitchen. Has the unit taken measures to prevent rodents from entering the kitchen?

Finding: There are no rodent traps observed around the doors to the kitchen. Kitchen officer stated that there is a rodent problem.

2. Are any available traps clean and free of trapped vermin?

Finding: No rodent traps are visible to determine if they are clean and free from trapped vermin.

3. Are walls, light switches, and ceilings kept clean and free of grease build up?

Finding: There is observed dirt on walls and around common contact points.

4. Do the bathroom areas have hand washing signs/instruction posted in the restrooms?

Finding: No hand washing signs observed as being posted.

5. Are there temperature logs posted on the walk-in coolers?

Finding: Temperature logs are stored in the kitchen office. Not in the cooler areas.

BUCKLEY UNIT

FOOD SERVICE

1. Do the bathroom areas have hand washing signs/instruction posted in the restrooms?

Finding: There is no hand washing instructions in the Kitchen inmate restroom. Instructions for the staff restroom were lying on top of the mirror and could not be read.

2. Does the unit have a written meal evaluation completed for each meal served?

Finding: The unit does not complete meal evaluations.

3. Are all locking devices to include padlocks secured when not in use?

Some locks in different areas of the kitchen were observed unsecured during the inspection.

KEYS AND RADIOS

1. Interview the Chief of Security. Does the unit conduct emergency key drills on a frequent basis?

Finding: An emergency key drill was conducted. Observation indicates staff was unaware of the procedures and protocols to acquire and deploy emergency keys.

2. Are radios being signed out on the 716-1 Equipment Issue Form?

Finding: Radios not being signed on the 716-1 Equipment Issue Form.

WEAPONS AND DART

1. Inspect the armed post for cleanliness and appropriateness of items stored.

Finding: The inside of the tower area need to be cleaned, especially the ladder well area.

INMATE MANAGEMENT

1. Is the yard neat, clean and free of trash and weeds?

Finding: Weeds and wind blown trash were observed in different locations of the unit.

BUCKLEY UNIT

2. Is the inmate sweat lodge neat, orderly and free of trash and unauthorized items?

Finding: Wind blown trash was observed in the sweat lodge area.

3. Is the paint on the unit in a state of good repair?

Finding: Several areas of the buildings (interior and exterior) were in need of painting.

4. Are inmate beds made and inmate up during normal work hours?

Finding: Beds were observed around the Unit unmade or had inmate sleeping under the covers. This was especially true in the detention units.

5. Are all security lights on during normal work hours?

Finding: One light on the yard and several perimeter quartz lights were observe not operating.

6. Are inmates sleeping during normal work hours?

Finding: Several inmates in the unit detention areas were observe sleeping and under the covers.

7. Are inmate restrooms / showers clean, and free of mold and mildew?

Finding: Some showers observed during the inspection were in need of minor cleaning. Several shower appeared to have mold growing in the lower portion of the tile grout.

8. Is the porters closets clean, orderly, and demonstrate attention is given to sanitation?

Finding: Porters closet were observed unorganized and in need of cleaning.

9. Are inmates in compliance with grooming standards?

Finding: Inmates in the detention areas were observed not in compliance with grooming regulations, citing they cannot access razors or clippers.

10. Are inmate wearing ID cards as expected, in the upper left quadrant of their shirts?

Finding: Several inmates were observed without ID cards, citing the need for a clip as the reason for the ID card not being in the correct spot. Staff advised they were awaiting clips to ensure compliance.

BUCKLEY UNIT

11. Is the recreation equipment appropriate and serviceable?

Finding: Inmates were observed with only one basketball for each recreation yard for approximately 100 inmates. The basket ball was worn out and several inmates approached to complain about the lack of recreation equipment.

12. Are staff members in main entrance overwhelmed at shift change?

Finding: The staff member at the ingress point of the Buckley Unit was easily overwhelmed when oncoming staff were entering. At one point, one staff member easily passed the officer, dropped his items and went back to clear the metal detector before retrieving his items to enter the unit.

OTHER ENVIRONMENTAL

1. A dark brown civilian jacket was found in a dry storage locker, Inmate kitchen workers had access to the area where the jacket was found.

2. Two walk through doors were checked for fly fan operation. The fly fans on neither door started when the door was opened. The unit has completed work orders on both doors. There seemed to be a lot of flies in the kitchen area during the inspection

3. Two floor drains in the Buckley Unit Kitchen were observed with standing water. When questioned, inmate advised that water drainage is a constant problem.

4. During emergency key testing, a considerable amount of dirt was observed under the swinging gate behind Housing Unit #2, to the point it made opening of the gate extremely difficult.

5. Inventory only includes yard radios and does not include radios which are permanently assigned to some Buckley unit staff members. Permanently assigned radios may be accounted for in some other area.

6. The unit experienced a high volume of battery and radios failures during the inspection.

7. Buckley Unit experiences erosion areas on the east side of the unit during rain storms. There are two repaired washed out areas where the fill dirt appears to be very soft under the exterior fence.

8. Buckley unit does not have a sand trap or perimeter on two sides of the unit where they are next to adjoining units.

BUCKLEY UNIT

9. Unit Captain demonstrated he has the ability to cross the alarm system next to a light pole on the north side of the unit without setting off the zones.

10. A further inspection revealed the system could be violated without activating the zone alarm in several other areas.

11. Weapons are stored on the upper most level of the tower in a sealed box, even when the tower officer is not present. The storage area does not allow for the weapons to be viewed unless the box is unlocked.

12. During inspection of the tower, it was noted that the tower officer identified two compressed rounds at shift change. Notification was made to the complex armory for assistance. During a follow-up three days later, the round had not been replaced.

13. During the inspection, several inmates approached and claimed about issues related to conditions of confinement. The vast majority of the issues were related to cell plumbing failures in the detention overflow housing area, ether not being reported or not being repaired for extended periods of time.

RAST UNIT

FOOD SERVICE

1. Are walls, light switches, and ceilings kept clean and free of grease build up?

Finding: Walls, light switches and ceilings are not kept clean and free from grease build up.

2. Is the kitchen equipment, stove hood and filter kept clean and free of grease build up?

Finding: Stove hood and filters are not being kept clean and free of grease build up.

INMATE MANAGEMENT

1. Is the yard neat, clean and free of trash and weeds?

Finding: Yard is not neat and clean and free of trash and weeds.

2. Is the inmate sweat lodge neat, orderly and free of trash and unauthorized items?

Finding: Sweat Lodge is not neat and has trash it has not been used in 6 months.

3. Are inmate beds made and inmate up during normal work hours?

Finding: Approximately 50% inmates beds where not made during normal work hours.

4. Are inmates sleeping during normal work hours?

Finding: Some inmates where sleeping during normal work hours.

5. Is there a record demonstrating 704 inspections have been completed?

Finding: They are being completed but there is evidence of inmates covering windows after the inspection was completed.

6. Are inmates wearing ID cards as expected, in the upper left quadrant of their shirts?

Finding: Approximately 60%+ inmates where not wearing ID cards they said they had no metal clips etc.

7. Does it appear inmate work assignments are being executed? (Yard raked, grass cut?)

Finding: Yard has weed and lots of trash. The explanation was given that the land fill is across the road and wind blows it over to the yard.

RAST UNIT

8. Do officers report executive team staff tour the unit frequently or are seldom seen?

Finding: Approximately 50% staff reported that executive staff are seldom seen.

BACHMAN UNIT

FOOD SERVICE

1. Observe the external area and doorways in the Kitchen. Has the unit taken measures to prevent rodents from entering the kitchen?

Finding: The unit has no external traps for rodents.

2. Do the bathroom areas have hand washing signs/instruction posted in the restrooms?

Finding: There was no hand washing sign in the inmate bathroom.

3. Are items in the walk-ins and dry storage stored correctly? (leftovers should be <40 degrees and logged, raw items on the bottom shelf, all items dated when received, First In First Out, etc.)

Finding: Items labels were not facing out and missing dates.

4. Are temperatures being documented when food is being transported to or from the prep kitchen to other units or complex's?

Finding: The kitchen does not maintain a log of the temperatures of the food being transported to the Sunrise Unit.

KEYS AND RADIOS

1. Interview the Chief of Security. Does the unit conduct emergency key drills on a frequent basis?

Finding: Emergency keys drills are conducted once a month on Days or Swings but not on Graves.

PERIMETER AND TOWERS

1. Examine the physical structure and components of the perimeter and make a determination of adequacy. Does the perimeter adequately provide for security, detection of escape or unauthorized entry?

Finding: The sand traps are hard packed.

2. Inspect perimeter fencing, detection systems, sand traps, concertina wire, and other deterrents for proper function and installation. Are all perimeter fencing, detection systems, sand traps, concertina wire, and other deterrents in good working order?

Finding: The sand traps are hard packed.

BACHMAN UNIT

3. Inspect perimeter sand traps and evaluate consistency of material. Does the sand trap produce a visible V'ed track?

Finding: The sand trap was not of the consistency to produce a visible track.

4. Review institutional / post orders to determine if a clear escape response protocol is delineated within the documents. Does the procedure provide clear direction to staff discovering an alleged escape?

Finding: The only Post order with any direction regarding escapes was the Detention Unit PO.

5. Review logs and records to determine how the unit/institution documents perimeter operation.

Finding: There was no communication between the officer conducting the perimeter/zone checks and Main Control. The only way the officer knew if a zone activated was when the perimeter lights came on. The Main Control Officer did not verify it was the officer conducting the zone checks who activated the alarm before it was reset.

SECURITY DEVICES

1. Has the Chief of Security observed subordinate staff conduct Security Device Inspections?

Finding: The Captain has provided a check list for each post but has not personally observed staff conduct an inspection.

2. Does the Chief of Security have an established format for conducting security challenges where upon the staff are tested during security device inspections, providing both a performance tool as well as a training aid?

Finding: The Captain conducts weekly and monthly challenges for the zone areas only.

EAGLE POINT/SUNRISE UNIT

INMATE MANAGEMENT

1. Are inmates wearing ID cards as expected, in the upper left quadrant of their shirts?

Finding: Not all inmates wore ID cards in upper left quadrant.

OTHER ENVIRONMENTAL

1. Fire extinguishers do not have current-date inspections. Several had not been inspected since August 2010.
2. Fire system and generators panels in main control show a constant alarm.
3. Storage areas where chemicals are stored are being secured with white socks.
4. Tool inventories are logged in journals, however, it appears that a completed log (excluding date) is photocopied and used as a daily record instead of a daily handwritten record.
5. Item #26, Pancake Dispenser, was labeled 'do not use'. No work order for the item could be produced at time of inspection.

BARCHEY UNIT

INMATE MANAGEMENT

1. Are inmate beds made and inmate up during normal work hours?

Finding: Several inmates were observed in unmade beds during work hours.

2. Are inmates sleeping during normal work hours?

Finding: Several inmates observed sleeping during work hours.

3. Are inmates in compliance with grooming standards?

Finding: Several inmates found to have goatees, mustaches too long and to be unshaven.

4. Do inmates on the yard seem to want to address issues with visitors?

Finding: Some issues. Not out of the ordinary.

COMPLEX

KEYS AND RADIOS

1. Interview the Chief of Security. Does the unit conduct emergency key drills on a frequent basis?

Finding: Emergency key drills are not frequently conducted.

PERIMETER AND TOWERS

1. Conduct an unannounced security challenge on each unit perimeter to monitor response, and identify any areas of concern. Provide results to Complex Major / Chief of Security upon conclusion of exercise.

Finding: Tracks set on the west side perimeter were not discovered. After waiting for approximately 48 minutes, the inspector called the tracks to the attention of the perimeter officer.

WEAPONS AND DART

1. Inspect the monitoring equipment (cameras, recording devices, etc). Are they maintained in good repair?

Finding: A monitor in main control has been out since September 2010.

2. Does the Complex Armorer conduct a weekly inventory of the locker?

Finding: Weekly inventories are not appropriately documented.

During the inspection of Morey unit it was observed that COII Carbajal has gone above and beyond policy in reference to accountability of tools. COII Carbajal has created a database for the tools assigned to the WBE wood working area at Morey Unit. The database has the shadow number, the tool description, and has a picture of each tool on the shadow board. There is also a database for the Tool boxes which includes the drawer and slot reference and pictures. This system allows not only for the ease of inventory but also assists staff to see exactly what a tool looks like if it is missing and a search is required.

OFDNI

ASPC LEWIS CORRECTIVE ACTION PLAN

Unit Name	Competency	Findings	ID	Action Plan	Completion Date
Barchey	Classification	No DNHW review comments on DT08 screen.		Policy change is needed. Recommend a Y/N box be placed on DI99 screen for COIII's to verify DNHW's have been reviewed. This will eliminate the possibility of the AIMS system crashing based on entries in DT08. Currently the annotation is being placed on	2/8/2011
Barchey	Classification	Medical porter has drug disciplinary.		I/M was immediately removed from this position. WIPP is screening all inmates to ensure compliance.	2/15/2011
Barchey	Security Devices	No tours being conducted. Staff are unaware who their EEO representatives are.		Barchey has assigned an additional EEO representative who is scheduled to attend EEO training in March 2011. The current EEO representative was redirected. EEO representative will now attend at a minimum a briefing each shift to discuss EEO and will als	2/8/2011
Barchey	Inmate Services	No post order for UA officer.		Complex is generating PO 043 for all units for consistency. Once received it will be implemented at unit.	3/1/2011
Barchey	Inmate Services	No logs indicated the presence of the paralegal on the unit.		The Paralegal has now been added to the sign in/out staff log at Main Control. Additionally a log has been implemented in the library for the Paralegal to track and monitor inmates seen for paralegal purposes.	2/14/2011
Barchey	Inmate Services	No logs indicating the presence of the legal access monitor on the unit.		The Legal Access Monitor has now been added to the sign in/out staff log at Main Control. Additionally, a log has been implemented in the library for the Legal Access Monitor to track and monitor legal access on the unit.	2/14/2011
Barchey	Inmate Management	Staff do not always strip search inmates when conducting UA's.		All staff are being re trained on the policy and a training roster has been filed for each shift.	2/28/2011
Barchey	Required Services	Property files are in numerical order		Property files are being placed in terminal digit order.	2/16/2011

Barchey	Required Services	Observed 3 COIII's wearing Tennis shoes.		Training for all staff on Employee Grooming and Dress is being conducted. COIV will complete grooming inspections.	2/28/2011
Bachman	Classification - Does the inmates assigned COIII notify the inmate of the Central Office Classification action and notate in AIMS when the inmate has been notified and of the inmates right to appeal?	Inmates are given an appeal form when the COIII makes the recommendation for Max Placement instead of after being notified of Central Office Classifications decision.		CO IV Baca held a meeting with CO III's and provided re-training to the staff about Max Custody packets, time frames and notifications to the inmate.	2/4/2011
Bachman	Detention Services - Review a random selection of post journals. Are Command staff and other services being logged?	The officers do not always log when Command staff and service staff visit the inmates in Detention		Redirection to Staff and Supervisors about ensuring the Journal reflects when Command staff are present in Detention and Supervisors and Command staff are to review journals for any discrepancies and are to sign in red ink. Red pens have been given to eac	Immediately
Bachman	Detention Services - Review IDR's. Do logs include information listed under 1.4 - 1.4.2?	IDR's do not contain all of the required information, medical, COIII, cell cleans, state issue, laundry		Redirection to Staff working in Detention and Supervisors and ensuring compliance with IDR logs. Routine inspections by Detention Sgt, COS, COIV, ADW and DW to ensure compliance of all IDR logs.	Immediately
Bachman	Food Service - Are equipment repairs handled correctly, and in a timely manner?	Two Ovens have been inoperable for (2) months waiting for parts		Parts were ordered (Work order # 86463). Waiting for delivery and installation of part to repair the oven.	3/31/2011
Bachman	Food Service - Are inmates signing for his/her Diet?	Inmates do not always sign the diet book when receiving their meals. The Food Service worker passes the Diet Book out to the inmate but does not verify the inmate signed for his diet when the book returns.	Food Service	Redirection to Canteen staff about verifying inmates sign for diet during meal.	Immediately
Bachman	Food Service - Does all food being transported remain in the proper temperature safe zone?	The Dinner meal was at Detention for (30) minutes before it was served - the cart used for the hot tray was not operational		Hot cart used for Detention is currently operational. If at any time the hot cart is not operational, staff working Detention have been instructed to immediately serve the meal upon receipt from kitchen This matter is being elevated to the Division Direct	Immediately
Bachman	Food Service - Does medical provide the unit with a list of all inmates assigned to work in the kitchen?	No, the WIPP Officer finds the information by checking AIMS		Policy change needed as this is standard practice. Elevated to DDO	NA

Bachman	Food Service - Review AIMS screen for all inmates assigned to the kitchen. Are all inmates assigned to the kitchen medically cleared?	One Am kitchen Worker was not medically cleared to work. He had been cleared to work in the kitchen on 1-15-11 but his status changed on 1-19-11 with no notification to the unit of status change.		FHA to coordinate with Medical staff and Unit DW to advise whenever an inmates medical clearance is changed. Additionally, WIPP Officer to review on a Monthly basis inmates assigned to Kitchen and their Medical clearances	Immediately
Bachman	Ingress / Egress - Does the assigned officer question each person attempting to enter the unit in regard to possession of contraband items?	Ingress Officer did not ask each employee if they had any contraband in their possession		Redirection to all staff and Supervisors about properly asking incoming staff if they have contraband in their possession. Current Post Orders reflect proper language for conducting this procedure. Ingress Post Orders in Lobby	2/28/2011
Bachman	Ingress / Egress - Does the officer maintain an appropriate flow control during periods of high traffic, allowing for ample time to inspect staff and property items during ingress / egress?	Ingress Officer did not control the ingress process - each employee entering determined how and when they were cleared to enter the unit.		Redirection to all staff about allowing the check in Officer to properly conduct a search of all personal belongings without being rushed. Additionally on days permitting. Supervisors to be present and oversee Ingress procedures.	2/28/2011
Bachman	Inmate Management - Does the grievance log reflect the grievance appeal was submitted to the Warden within time frames?	All required information was no entered in the Grievance Log.		Redirection to CO IV. The Grievance book contained all necessary and required information and the CO IV has updated the log to reflect this information and will inspect on a regular basis to ensure compliance.	2/28/2011
Bachman	Inmate Management - Observe a search of an inmates' living area. If the inmate is not present, was the absence explained in the Journal and log?	Officers were not aware of the requirement to log the reason for the inmates' absence during a search of his living area.		Redirection to staff through discussion and briefing topics about the importance and need of two officers when an inmate is not present and housing area search is conducted. Also redirection to staff to ensure this practice is logged in the Correctional	Immediately
Bachman	Keys & radios - Each time a key set is issued, or returned does the officer responsible make the appropriate entry in the Key and Credit Card Control sheet (Form 702-1) specifying at a minimum: Key number, date of issue/return, name of authorized staff m	Keys returned to Main Control at shift change were not signed back in or placed into the key boxes until (1) hour after shift change.		Chief of Security to redirect all Supervisors and Staff about conducting an ending Key inventory before end of shift and transferring over to the oncoming shift. Shift Officers working in Main Control will conduct a beginning inventory with in the hour i	Immediately

Bachman	Perimeter & Towers - Minimum custody units- Does the Unit maintain sand traps to provide an indication of escape path or fence tampering?	Sand trap adjacent to the outer perimeter fence is hard packed.		ASPC-Lewis is our newest complex and it appears they are using physical plant standards which were written in October 2010. None of our existing facilities will meet the physical plant standards.	NA
Bachman	Perimeter & Towers- Minimum custody units - Is the perimeter fencing in compliance as outlined above	The fence does not have a concrete anti-dig barrier footing 6" wide by 24" deep. The bottom of the fence is not secured by a (1-1/2" minimum) bottom rail secured to the concrete base by an anchor bolt or method approved by the Department.		ASPC-Lewis is our newest complex and it appears they are using physical plant standards which were written in October 2010. None of our existing facilities will meet the physical plant standards	NA
Bachman	Required Services - Are applications stamped "Received" including the date on the reverse side?	Not all visitation applications reviewed were stamped "Received"		Redirection to Visitation Staff to ensure applications are stamped received. Currently Visitation staff are auditing all files to ensure compliance.	3/31/2011
Bachman	Required Services - Are appropriate Post Orders for property updated to within 90 days of the effective date of this DO?	The latest version of Post Orders was in Jan/2010		Error in dates Post Orders. All Post Orders currently have the corrected and updated date of revision.	1/27/2011
Bachman	Required Services - Did all security staff have assigned hand cuffs and chemical agents during inspections?	(2) officers did not have their assigned hand- cuffs and chemical agents in their possession.		Redirection to Supervisors and ensuring each staff member has their required handcuffs, OC spray and Duty Belt. Each Supervisor to conduct routine Uniform inspections on staff.	Immediately
Bachman	Required Services - Do staff audit property files on a random basis?	The officer says she rarely audits the property files.		Redirection to Mail and Property staff about auditing files on a consistent and routine basis. Supervisor to provide follow-up and follow-through	Immediately
Bachman	Required Services - In those instances where an inmate does not pack his/her property, does the inventory indicate receipt of each item by cross - checking the "receiving" column?	Not all property forms were cross - checked		Redirection and training to staff through discussion and briefing topics about cross checking property forms when an inmate is received to ensure all property is accounted for and/or annotate any discrepancies.	Immediately
Bachman	Required Services - Is the visitation schedule posted in the registration , visitation and inmate housing areas?	The visitation schedule is not posted in the registration or in the visitation rooms.		The Visitation schedule is now posted upon entry into Admin area for visitors to view.	2/18/2011
Bachman	Required Services - Randomly select 10 files	(1) file did not contain a 911-1 form		Redirection to Visitation Staff to ensure applications are stamped received. Currently Visitation staff are auditing all files to ensure compliance.	3/31/2011

Bachman	Required Services - Uniforms / jackets	Some officers were observed wearing jackets without a replica of the breast badge.		Redirection to Supervisors about ensuring they conduct routine Uniform inspections on staff and redirect those staff out of compliance pr policy	Immediately
Bachman	Required Services - Were uniforms observed to be clean, in good condition and devoided of stains or patched areas?	Officers were observed wearing faded trousers.		Redirection to Supervisors about ensuring they conduct routine Uniform inspections on staff and redirect those staff out of compliance pr policy	Immediately
Bachman	Required Services -Are legal boxes labeled to indicate total number of boxes in storage?	Of the (3) Inmates who have legal boxes, only one set of boxes were labeled correctly.		Redirected Mail and Property staff to number legal boxes. Finding has been corrected and fixed.	2/28/2011
Bachman	Security Devices - Does the Chief of Security maintain a current file of all documentation relating to inspections, maintenance requests, follow-up actions, and preventive maintenance programs within the institution/unit?	The COS does not maintain a good system for tracking security device deficiencies. There is a current log explaining the latest delay in repairing a security device but there is no historical data for tracking the delays		This system is on a shared drive and electronically tracks. Historical data can be pulled as necessary.	NA
Bachman	Security Devices - If deficiencies were discovered, were all appropriate documents submitted (information reports and work orders?)	Work Orders are submitted but not Information Reports		Redirection to staff and Supervisors about ensuring Information Reports are completed for all Work Orders. Chief of Security to follow up and ensure compliance.	Immediately
Bachman	Security Devices - Were appropriate entries made in the Correctional Service Journal?	Entries did not include IR or Work Order numbers in journal		Redirection to Staff and Supervisors about ensuring the Correctional Service Journals reflect the Work Order # and IR #. Supervisors to follow up and ensure compliance	Immediately
Bachman	Security Devices - When deficiencies are noted, does all documentation contain the cross referenced information reports?	Entries did not include IR or Work Order numbers		Redirection to staff and Supervisors about ensuring Information Reports are completed for all Work Orders. Chief of Security to follow up and ensure compliance.	Immediately
Bachman	Tools - Are all tools color - coded using the applicable unit's assigned color?	The color - coding is worn off a majority of the tools.		Brown paint received. Tool Room Officer is currently in the process of re-color coding all tools.	2/18/2011
Bachman	Tools - Are class A tools stored in tool pouches / boxes clearly marked, and shadowed within the tool carrier, for ease of inventory and visual monitoring?	The Key Control Tool box contains Class A tools is not shadowed.		Corrected. Officer Schwiesow who oversees Key Control, has shadowed and inventoried the Key Control tool box.	2/24/2011

Bachman	Tools - Are Master inventories completed monthly,	The COS does not receive a copy of Medical Master Tool inventory.		Medical Tools have been added to the Tool inventory for the Unit. Chief of Security will receive and review tool inventories on a Monthly basis.	2/28/2011
Bachman	Tools - Are tools stored on a shadow board with shadow that closely resembles the tool?	The Key Ring Crimper which is a class A tool is stored in a locked drawer in the Key Control Office and it is not shadowed		Corrected. Officer Schwiesow who oversees Key Control, has shadowed and inventoried the Key ring crimper. All Key Control tools have been moved to Unit Tool Room.	2/24/2011
Bachman	Tools - Does the officer signing out the tools keep a copy of the completed form?	The Work Crew Officer does not keep a copy of the 712-4 form on him - he transfers the information to the out count form		Redirection to Work Crew Officer. Whenever he has his work crew out, a copy of Tool Check Out Form 712-4 will be on his person.	Immediately
Bachman	Tools - Does the person who signed out/in the tools keep a copy of the signed out sheets in their possession while they have the tools signed out?	The Work Crew Officer does not keep a copy of the 712-4 form on him - he transfers the information to the out count form		Redirection to Work Crew Officer. Whenever he has his work crew out, a copy of Tool Check Out Form 712-4 will be on his person.	Immediately
Morey CLASSIFICATION	Does the inmate's assigned CO III notify the inmate of the Central Office Classification action and notate in AIMS when the inmate has been notified and of the inmate's right to Appeal?"	Unit COIII's not making entries on AIMS screen.		COIIIs have been redirected to make sure inmates are notified when they may appeal a Max Custody decision and to make DT08 2/10 comments for tracking.	2/16/2011
Morey COUNT MOVEMENT	Does the unit have a picture board that is updated and matches the unit inmate count?	68 photos missing from count board.		The unit is in full compliance, all pictures have been printed and posted on the Count Board.	2/18/2011
Morey COUNT MOVEMENT	Observe an officer clearing count. Is this procedure done correctly?	Count Officer is clearing count without notifying the Shift Commander.		Count Movement Officer is notifying Shift Commander when count clears.	2/16/2011
Morey COUNT MOVEMENT	Is the shift supervisor actively involved in the count process to ensure its accuracy?"	No supervisor involvement was observed during formal count.		The supervisors have been redirected, shift Commander/supervisor are now present during count	2/16/2011
Morey COUNT MOVEMENT	Does the shift supervisor or commander clear all formal counts?	No, count being cleared by Count Movement officer.		The supervisors have been redirected, shift Commander/supervisor are now present during count	2/16/2011

Morey FOOD SERVICE	Review AIMS screens for all inmates assigned to the kitchen. Are all inmates assigned to the kitchen medically cleared?	Two inmates who are currently assigned in the kitchen were not cleared by medical.		Checked all inmates currently assigned to kitchen and discrepancy corrected. Implemented kitchen medical clearance check prior to assignment and monthly review of inmates assigned to kitchen.	2/15/2011
Morey FOOD SERVICE	Are equipment repairs handled correctly, and in a timely manner?	There were no outlet covers on south wall of kitchen and no evidence of action being taken.		Work Order 87822 submitted, corrected on the spot.	2/17/2011
Morey INGRESS/EGRESS	Observe staff and other persons entering the unit to determine compliance to post orders / unit directives. Are assigned staff compliant with post directives listed in post orders?	Inspectors cell phone not checked, food items waved through the metal detector, and hand wand on site not working properly.		Direction has been provided regarding ingress / egress and compliance with DO 513. The DW and ADW has been present on several occasion to ensure full compliance.	2/16/2011
Morey INGRESS/EGRESS	Are all staff entering the unit required to pass through a metal detector while being observed by the assigned officer?	Lobby officer was busy checking backpacks/bags and did not watch staff walk through the metal detector.		Direction has been provided regarding ingress / egress and compliance with DO 513. The DW and ADW has been present on several occasion to ensure full compliance.	2/16/2011
Morey INGRESS/EGRESS	Observe break areas and offices for personal property items that are not in compliance, or have not been authorized. Are the areas free of contraband / unauthorized property?	Glass candle jars and non-see through containers observed in various areas		All glass items (candle jars) and non clear items have been removed from the various offices and unit.	2/16/2011
Morey INGRESS/EGRESS	Observe break rooms / lunch areas, or other locations where staff consume meals. Are unauthorized / excessive food items, utensils, or related meal items present?	Some of the items in briefing room refrigerator were not in see through containers.		Non-Compliant items removed from the unit. Direction provided to ensure that DO 513 is enforced.	2/11/2011

Morey INGRESS/EGRESS	Inspect unit ingress / egress points and determine if there are locations where staff can by-pass and/or defeat this procedure. Are the locations secure to the degree staff cannot by-pass the security station?	No physical barrier preventing staff from returning to an unsecured area after passing through the metal detector.		The unit changed the layout by adding tables as a barrier to ensure all staff and items pass through the metal detector.	2/22/2011
Morey INGRESS/EGRESS	Monitor access points to verify all staff, and associated personal property are searched prior to access being granted to the unit. Were all staff members searched thoroughly prior to entering?"	Staff are not thoroughly searched / inspected prior to being allowed to enter the unit.		Direction has been provided regarding ingress / egress and compliance with DO 513. The DW and ADW has been present on several occasion to ensure full compliance.	2/16/2011
Morey INGRESS/EGRESS	Do assigned staff members inspect / search all personal property to include food items, and require applicable items to be cleared via the metal detector?"	There was no consistent approach by the observed officers.		Direction has been provided regarding ingress / egress and compliance with DO 513. The DW and ADW has been present on several occasion to ensure full compliance.	2/16/2011
Morey KEYS AND RADIOS	Will a visual inspection of designated key storage areas allow for easy identification of missing key rings?	Five key hooks in emergency key box have two key sets on one hook. The inventory shows 12 key sets when there are actually 17 sets.		Tool Control Officer corrected this issue by installing new hooks so only one key set per one hook. The inventory reflects the new change.	2/15/2011
Morey PERIMETER AND TOWERS	Does the post journal have all required entries? Inspect any secondary logs the tower staff are responsible for completing?	Correctional Service Journal did not have security device checks annotated.		Highlighters have been issued and direction provided that all security checks are to be highlighted. Journals are being reviewed on a weekly basis for required entries. Daily journal checks are being completed by supervisors with on the spot redirection i	2/16/2011

Morey PERIMETER AND TOWERS	Close custody units - Do the lights in the adjacent zones to either side of the alarmed zone activate when an alarm condition triggers the quarts lights associated with the alarmed zone? Interview random staff assigned to the control room to determine ac	Lights 12, 14, 42, and 43 did not activate when zone accessed.		The zone lights are checked twice per shift. Norment has repaired the zone light and they are now functional.	2/22/2011
Morey PERIMETER AND TOWERS	Close custody units - Does the unit have an external sand trap at least 15 feet in width and sloped to provide drainage without erosion of sand material?	Drainage is not proper causing heavy erosion at first perimeter fence at lights 38, 39 and 40.		The erosion has been fixed with additional sand placed were needed.	2/25/2011
Morey PERIMETER AND TOWERS	Close custody units - Is there one section of 30" razor ribbon vertically in each corner and at the fence intersection including on the yard side where fences contact buildings?	No vertical razor ribbon on the North/West corner of the B building.		Work Order 87801 submitted the material has been delivered to the unit with project completion date of 02/25/2011.	2/25/2011
Morey SECURITY DEVICES	Were appropriate entries made in the Correctional Service Journal?	No consistency with entries in Correctional Service Journal		Highlighters have been issued and direction provided that all security checks are to be highlighted. Journals are being reviewed on a weekly basis for required entries. Daily journal checks are being completed by supervisors with on the spot redirection i	2/16/2011
Morey SECURITY DEVICES	Does the Chief of Security ensure SDI work order log repairs are made within time frames?	Zone lights out since 12-31-2010, still not functioning on 01-24-2011.		The zone lights are checked twice per shift. Norment has repaired the zone light and they are now functional.	2/25/2011

Morey SECURITY DEVICES	Do interviews with staff indicate if the EEO Liaison conducts tours or attend briefings/meetings each month on the Unit?	Per the assigned EEO liaison unit tours and shift briefings are not occurring.		Complex EOL liaison Amber Wiley met with all EEO liaisons and instructed them on required monthly duties. Unit EOL liaisons are required to conduct monthly tours on each shift and submit a report to Warden Diaz and EEO Coordinator Eric Abt.	1/31/2011
Morey SECURITY DEVICES	Does a review of random EEO Liaison reports indicate the assigned EEO liaison is making required tours?	Per the assigned EEO liaison unit tours are not occurring.		Complex EOL liaison Amber Wiley met with all EEO liaisons and instructed them on required monthly duties. Unit EOL liaisons are required to conduct monthly tours on each shift and submit a report to Warden Diaz and EEO Coordinator Eric Abt.	1/31/2011
Morey TOOLS	Are tools too large to store on the shadow board in a location where an outline resembling the tool is clearly shown?	The Drag tool secured to wall within the entry of the unit was not shadowed.		Corrected the next day. The drag tool is shadowed.	2/16/2011
Morey TOOLS	Are tools being signed out/in appropriately on the correct form? (Tool Check out Form 712-4)	Power Auger out but not signed out.		Corrected the next day, staff are now using 712-4 to check out this tool. The Captain will ensure a month follow up is completed for accuracy in addition to the GAR through out the month by the management team.	2/16/2011
Morey TOOLS	Observe posted inventory sheets. Compare inventory with stored tool. Is the inventory accurate?	Two sets of hair clippers found in flammable storage cabinet were not inventoried.		Clippers removed and stored in proper area.	2/16/2011
Morey TOOLS	Are tools stored on a shadow board with shadow that closely resembles the tool?	Medical Tools are stored in a filing cabinet with no shadow.		Medical is currently reviewing their inventory and identifying the medical tools that need to be shadowed.	3/1/2011

Morey TOOLS	Are all tool inventories logged into the appropriate Correctional Service Journal by those staff who conducted the inventories?	No Correctional Service Journal being used, and no daily inventory being conducted.		We are in the process of selecting a dedicated tool control officer that will ensure daily inventories are conducted and journal entries are made. There are days when no staff works this area.	2/16/2011
Morey TOOLS	Are updated MSDS sheets found at all storage locations, for all products found inside the storage site?	Mixture of current and old MSDS sheets for the same product.		OSHA standard, 29 CFR 1910.1020, Access to employee Exposure and Medical Records is being followed. The newest sheet has been placed in front in addition to the required older forms remaining.	2/15/2011
Morey WEAPONS	Are staff members who are checking the seal on the DART locker at the beginning of each work shift and its condition documenting their findings in a Correctional Service Journal?	Seal numbers not being entered in Correctional Service Journal.		Seal log present and direction regarding its use given. Checks are being completed by the captain and supervisors with on the spot redirection if necessary.	2/16/2011
Morey WEAPONS	Interview the Chief of Security and Armorer. Determine the number of times the locker has been accessed during the previous six months. If so, have there been entries in the Correctional Service Journal and IR's been submitted for each instance?	Entries not being made in Correctional Service Journal.		A work Order was submitted to obtain the necessary razor ribbon and have it installed. The material has been delivered to the unit with project completion date of 02/25/2011.	2/25/2011

Morey WEAPONS	Are weapons issued only to officers, including TSU and DART teams, with current Firearms Qualification Card in their possession when the weapon is being issued?	Two DART responders did not have qualification cards on them.		Weapons cards are being checked for members who are placed on DART at the start of shift. No one without their card will be placed on the team.	2/16/2011
Morey DETENTION SERVICES	Review a random selection of post journals. Are command and services staff visiting as required and/or needed (religious, medical/mental watch, counseling staff included)?	There were no entries for medical visits on observed documentation.		Direction issued regarding logging all visitors to the area to include medical staff.	2/16/2011
Morey DETENTION SERVICES	Inspect detention facility (including cells). Is the area clean and sanitary?	Control Room and bathroom not clean.		New Post inspection sheets provided with sanitation on it. Direction to staff regarding post sanitation.	2/16/2011
Morey DETENTION SERVICES	Observe a sanitation inspection during a shift. Are all areas in the unit inspected during the shift?	Correctional Service Journal stated all areas were in compliance but the Control Room and bathroom were not clean to include a bag of trash so old the food was fermenting.		New Post inspection sheets provided with sanitation on it. Direction to staff regarding post sanitation.	2/16/2011
Morey INMATE MANAGEMENT	Does the log reflect that grievances were addressed by the unit Deputy Warden within 15 days?	Time frames not being met.		Some grievances were returned to COIII for further investigation required or inmate failed to submit documentation for proof of ownership of missing property. Current Unit grievance handling procedure will be revised to meet time frames requirements and	2/16/2011
Morey INMATE MANAGEMENT	Does the grievance log reflect the grievance appeal was submitted to the warden within time frames and was the grievance responded to within time frames?	Time frames not being met.		This has been corrected and redirection has been issued. COIV Chiu will ensure time frames are met or request an extension from the Warden.	2/16/2011

Morey INMATE MANAGEMENT	When searches are being conducted, is the search completed in a fashion which prevents inmate from passing contraband to another inmate during the search?	Staff not redirecting Inmates from approaching the Recreation fence when going to or returning from meal turn-outs.		This is a daily management issue and corrected on the spot as it occurs.	2/16/2011
Morey REQUIRED SERVICES	Is all outgoing mail delivered to the post office within 24 hours unless circumstances make delivery impractical?	Staff stated it sometimes take 36 hours.		We asked for clarification. The unit does not deliver mail to the Post Office as it is a complex function; complex picks mail up from the unit every day. We do not concur with this finding.	TBA
Morey REQUIRED SERVICES	Of the files reviewed, does every 911-I have the potential visitors full name, date of birth, address, phone number and relationship filled out?	3 inspected files were missing information (i.e. phone number or relationship).		This was corrected on the spot. The Visitation Sergeant will conduct a monthly audit to ensure records have accurate information as required.	2/16/2011
Morey REQUIRED SERVICES	Is the visitation file forwarded to the new unit within the first working day following an emergency movement?	One of the inspected files (01/24/11) belonged to an inmate who has been housed at Yuma since 11-15-2010.		The visitation Sergeant will conduct a weekly audit to ensure inmate records and/or property being transferred or prepared for transport to include property inventory, as outlined in D0 909	2/16/2011
Morey REQUIRED SERVICES	Were all observed moustaches, side-burns, and goatee's meeting policy requirements?	Staff observed with "soul-patches"		Uniform and Grooming compliance is an ongoing matter that requires daily attention. This has been emphasized to the supervisors and the Captain will ensure it occurs.	2/16/2011
Morey REQUIRED SERVICES	Were uniforms observed to be clean, in good condition, and devoid of stains or patched areas?	Staff were observed wearing baggy/worn out pants, and worn out t-shirts.		Uniform and Grooming compliance is an ongoing matter that requires daily attention. This has been emphasized to the supervisors and the Captain will ensure it occurs.	2/16/2011

Morey REQUIRED SERVICES	Were uniform shoes, boots and accouterments shined?	Staff observed wearing excessively dirty boots.		Uniform and Grooming compliance is an ongoing matter that requires daily attention. This has been emphasized to the supervisors and the Captain will ensure it occurs.	2/16/2011
Morey REQUIRED SERVICES	Is the following guidelines followed: Class "C" trousers, as outlined on Attachment C, may be worn as outlined in 1.2.3.4.2. These "B.D.U." style trousers shall be worn only with military style boots and shall be worn bloused, if designed to be bloused?	Staff observed wearing BDU pants without blousing them.		Uniform and Grooming compliance is an ongoing matter that requires daily attention. This has been emphasized to the supervisors and the Captain will ensure it occurs.	2/16/2011
Morey REQUIRED SERVICES	Are officers assigned to high risk areas wearing protective vests, and eye cover at all times when engaged in activities which could result in inmate contact?	Staff were observed in MDU with no vests or eye protection being worn.		This was corrected, the unit has ordered more vests and glasses for staff. All staff have been re directed to ensure safety and policy requirements.	2/16/2011
Morey REQUIRED SERVICES	REQUIRED SERVICES	Are officers assigned to high risk areas wearing protective vests, and eye cover at all times when engaged in activities which could result in inmate contact?	Staff were observed in MDU with no vests or eye protection being worn.	These were SSU staff conducting searches. The unit currently does not have enough vests and glasses for this number of staff. MDU staff were actually taking care of the inmates and the SSU staff were going in behind the MDU staff to search. We are working	2/16/2011
Stiner	CLASSIFICATION 1. Review DI95 screen for C0301 and C0401 appointments. Are any out of date?	Several inmates who were of date when observing the DI95 screen.		This is a staff training issue. Correctional Officer IV of the Unit is being held accountable to verify the DI95 screen daily and hold his Correctional Officers III's accountable.	2/15/2011

Stiner	2. Has the required information been entered in AIMS?	1 Interstate Corrections Compact inmate in the Detention unit. There are no AIMS comments made.	ICC inmates are separate from regular inmates and do not require all entries of classification. As soon as notification is received from the inmates home state it is entered into AIMS if a response is received.	2/14/2011
Stiner	3. Randomly select an adequate number of inmates assigned to Inmate Work Programs and review the inmates' AIMS files. Are the inmates' work assignments commensurate with the custody level of the inmates?	Health unit porter should not have been assigned to work in the health unit due to his past drug history.	Although this inmate had a positive UA eight years ago, he has been removed from the position.	2/15/2011
Stiner	COUNT MOVEMENT 1. Review a random sample of formal Count Sheets. Is the information recorded correctly?	Shift Commander is not consistently signing the count sheets in the Accountability Office.	THIS IS A BRIEFING ROOM TOPIC AS WELL AS A CAPTAIN/SUPERVISOR MEETING TOPIC. ALL SUPERVISORS HAVE BEEN DIRECTED THAT THE SHIFT COMMANDER HAS TO BE PRESENT IN COUNT MOVEMENT FOR ALL COUNTS—UNLESS THERE IS AN EMERGENCY INCIDENT HAPPENING. COUNT SHEETS ARE	2/14/2011
Stiner	2. Review a random sample of emergency (when applicable) Count Sheets. Is the information recorded correctly? Is the reason for the emergency count documented?	"EMERGENCY COUNT" is not documented on all count sheets to show the count was for emergency reasons.	SUPERVISOR'S MUST BE PRESENT IN COUNT MOVEMENT AT ALL COUNTS. COUNT SHEETS ARE TO BE SIGNED AT THAT TIME. COUNT SHEETS ARE TO BE CODED "E" FOR THE SPECIAL COUNT. THE COUNT SHEETS ARE TO BE CHECKED BY THE SHIFT COMMANDER FOR THOROUGHNESS.	2/14/2011
Stiner	3. Does the shift supervisor or commander review and sign all formal count sheets?	Shift Commanders are not consistently signing all formal count sheets.	ALL SUPERVISOR'S HAVE BEEN DIRECTED TO CONDUCT POST CHECKS EVERYDAY THAT THEY ARE ONSITE. POST CHECKS INCLUDE POST PAPERWORK. CONTROL ROOM COUNT SHEETS ARE TO BE SIGNED AT THAT TIME. COUNT SHEETS ARE TO BE CODED "E" FOR ANY SPECIAL COUNT.	2/14/2011

Stiner	FOOD SERVICE 1. Do Food Service Employees ensure sanitary standards are met in all food service operations?	Food and trash was observed on the floor. Walls were dirty and food preparation areas were not clean. There was no sanitizer in the rinse sink or in random sanitizer buckets checked throughout the kitchen area.		Exceptional sanitation standards cannot be expected during high food service times. All efforts are made to ensure that sanitary practices are followed. As for the sanitizer in the red buckets we will ensure that buckets are emptied and refilled on an	2/9/2011
Stiner	2. Are inmates in detention fed properly?	Cold and hot food are both served on the same tray. The trays are kept hot in warmers which makes the cold food warm/hot.		Hot and Cold foods are separated as of 2/9/11. They are transported to detention in separate carts so the hot food remains hot and the cold food remains cold.	2/9/2011
Stiner	INGRESS/EGRESS 1. Observe staff and other persons entering the unit to determine compliance to post orders / unit directives. Are assigned staff compliant with post directives listed in post orders?	No mention of duties of lobby area listed in Visitation Officers Post Order. Staff entering unit are not challenged for unauthorized items. Food is not consistently being required to pass through the metal detector.		Ingress/Egress post orders are being developed for Complex wide implementation. Due date for completion is March 1, 2011. Meantime, Stiner has interim procedures and has notified staff the proper way on conducting ingress/egress on the unit in briefings.	3/1/2011
Stiner	2. Test system repetitively during course of inspection to determine if procedures are applied on a constant basis. Did staff consistently apply security protocols during the visit? "	There is no consistency in the security of the front lobby area. Poor security practices are used by multiple staff.		Interim procedures set in place until Ingress/Egress post orders are completed at complex.	3/1/2011
Stiner	3. Evaluate procedure for inspecting personal employee property staff are attempting to introduce to the unit. Does the procedure contain clear direction for security officers?	There was no observed written procedure on the post for this. The protocol in place is ineffective. Staff did not consistently know how to check if a person was approved to bring on personal property. My State issued cell phone was not regularly checked		Interim procedures set in place until Ingress/Egress post orders are completed at complex.	3/1/2011
Stiner	4. Does the assigned officer question each person attempting to enter the unit in regard to possession of contraband items?	Not all of the staff are being questioned for contraband		Interim procedures set in place until Ingress/Egress post orders are completed at complex.	3/1/2011
Stiner	5. Does the officer consistently inspect incoming property for possible contraband?	There is no consistency in this process. Some staff are conducting thorough inspections. Other staff conducts a "rough scan" of staff property		Interim procedures set in place until Ingress/Egress post orders are completed at complex.	3/1/2011
Stiner	6. Does the staff member have an allowable personal property form signed by the current Deputy Warden authorizing these items?	Some personal property forms are outdated with signatures from past Administrators and not all personal property is listed on forms on hand.		Interim procedures set in place until Ingress/Egress post orders are completed at complex. Signature memo's will be updated upon Deputy Wardens return to the Unit on March 7, 2011	3/1/2011

Stiner	7. Observe break areas and offices for personal property items that are not in compliance, or have not been authorized. Are the areas free of contraband / unauthorized property?	Staff briefing room is cluttered with visible dirty food storage containers and trash on table areas.		Area has been cleaned of all unnecessary belongings and trash is emptied twice daily.	2/14/2011
Stiner	8. Does the Chief of Security have copies of all of the allowable personal property forms submitted by the unit staff?	The Chief of Security does not maintain a copy of all allowable personal property forms. Only copy is stored at the front lobby.		Chief of Security has copies of all exceptions to DO-513	2/14/2011
Stiner	9. Evaluate procedure for inspecting food items staff members are attempting to introduce to the unit. Does the unit procedure provide clear guidelines for assigned staff?"	Did not observe this appropriately addressed in the visitation officers post order.		Interim procedures set in place until Ingress/Egress post orders are completed at complex.	3/1/2011
Stiner	10. Does the officer scan food items, and question any abnormal observations such as excessive amounts, containers which do not allow for visual inspection, or questionable items such as metal utensils?	Officers did not question items brought into the unit.		Interim procedures set in place until Ingress/Egress post orders are completed at complex.	3/1/2011
Stiner	11. Does the officer ensure all food containers / packages are brought	Not all food items are required to pass through the metal scanner.		Interim procedures set in place until Ingress/Egress post orders are completed at complex.	3/1/2011
Stiner	12. Does the officer question any manufactured food items sealed in original packaging, causing difficulty in screening the contents inside?	Food items were not questioned.		Interim procedures set in place until Ingress/Egress post orders are completed at complex.	3/1/2011
Stiner	13. Evaluate all public access points and determine if an authorized	Staff conducting these duties could not speak to post orders or protocol. No reference or instruction was available for viewing.		Interim procedures set in place until Ingress/Egress post orders are completed at complex.	3/1/2011
Stiner	14. Monitor access points to verify all staff, and associated personal property are searched prior to access being granted to the unit. Were all staff members searched thoroughly prior to entering?"	Staff are not thoroughly searched / inspected prior to being allowed to enter the unit.		Interim procedures set in place until Ingress/Egress post orders are completed at complex.	3/1/2011

Stiner	15. Do assigned staff members inspect / search all personal property applicable items to be cleared via the metal detector?"	There was no observed consistent approach to this. The duties varied depending on what officer conducted the inspection or who was around.		Interim procedures set in place until Ingress/Egress post orders are completed at complex.	3/1/2011
Stiner	16. Inspect unit ingress / egress points and determine if there are locations where staff can by-pass and/or defeat this procedure. Are the locations secure to the degree staff cannot by-pass the security station?	The physical set up of this area allows staff to defeat the process of checking property brought into the unit.		The lobby tables have been reconfigured to provide a check point allowing staff to enter and exit the unit through the scanner.	2/14/2011
Stiner	KEYS AND RADIOS Does the inventory list all available keys, the total number of each on hand, along with the corresponding locking device each key will access?	1. The Master Key inventory does not list the total number of keys on hand. This information is documented in a separate report (Best report) which is not included with the Master Key Inventory report to the C.O.S.		KEY CONTROL OFFICER HAS BEEN DIRECTED TO UPDATE HIS EXISTING MASTER KEY INVENTORY TO DO-702 REQUIREMENTS. THIS INCLUDES KEY/KEY TAG NUMBERS, LOCK/LOCKING DEVICES LOCATIONS, NUMBER OF KEYS FOR EACH LOCK, NUMBER OF KEYS ON EACH KEY RING.	2/15/2011
Stiner	2. Does the inventory match up with existing key stock on hand? Compare inventory with available keys.	There were 16 keys sets reported as being out for repair but are reported "on site" on the daily key inventory completed by the officer in main control. 6 were restricted and 10 were non-restricted.		KEY CONTROL OFFICER HAS IMPLEMENTED A NEW SYSTEM OF ACCOUNTING FOR "OUT FOR REPAIR" KEYSETS. SIMPLY STATED, THERE ARE NO MORE RED-CHIT'S "OUT FOR REPAIR" KEYSETS BEING CARRIED IN THE KEY SAFES. IF THE KEYSET CANNOT BE REPAIRED IN A TIMELY MANNER--THE KEY	2/14/2011
Stiner	3. Does the unit have a monthly report on file showing the inspection and inventory of keys/key rings, emergency keys/key rings and locking devices for the past twelve months?	The key control officer did not have any record of any Master Key Inventories prior to 10/2010. The C.O.S. did not have a copy of any past Master Key Inventories available for viewing.		KEY CONTROL OFFICER HAS BEEN DIRECTED TO FOLLOW REQUIREMENTS OF DO-702. ADDITIONALLY, KEY CONTROL OFFICER HAS BEEN DIRECTED TO PROVIDE THE C.O.S WITH A SEPARATE COPY FOR HIS RECORDS.	2/14/2011

Stiner	4. Are all the key rings for a unit or specified zone (i.e.; complex security) stored and issued from designated Central Control Area?	SDU key sets are not checked out from Main control. They are stored in SDU control room. They are not accounted for accurately on a key control log. The log is in place but not filled out correctly.		THIS IS A STAFF TRAINING ISSUE, A BRIEFING ROOM TOPIC AS WELL AS A CAPTAIN/SUPERVISOR MEETING TOPIC. ALL SUPERVISORS HAVE BEEN TASKED WITH CHECKING POST PAPERWORK. FOR MAIN CONTROL ROOM AND SDU CONTROL ROOM THIS INCLUDES THE ACCOUNTABILITY OF KEYS.	2/14/2011
Stiner	5. Each time a key set is issued, or returned does the officer responsible make the appropriate entry in the Key and Credit Card Control sheet (Form 702-1) specifying at a minimum: Key number, date of issue/return, name of authorized staff member, initial	Restricted keys in the "Restricted key box # 2 are not signed out through Main control. Key set 31 (restricted) was not signed out on the key check out log.		THIS IS A STAFF TRAINING ISSUE, A BRIEFING ROOM TOPIC AS WELL AS A CAPTAIN/SUPERVISOR MEETING TOPIC. ALL SUPERVISORS HAVE BEEN TASKED WITH CHECKING POST PAPERWORK. FOR MAIN CONTROL ROOM AND SDU CONTROL ROOM THIS INCLUDES THE ACCOUNTABILITY OF KEYS.	2/14/2011
Stiner	6. Does each emergency key ring have a clearly visible color coded tag to identify the portals and/or buildings the key set will access?	Duplicate emergency key set #2 is supposed to be color coded white. There is no color painted on the key set.		ALL UNIT EMERGENCY KEYSETS HAVE BEEN CHECK BY THE KEY CONTROL OFFICER AND REPAINTED IF NEEDED.	2/14/2011
Stiner	7. Does the staff member demonstrate the ability to obtain and utilize emergency keys? Randomly select a staff member from each unit and each shift and direct them to gain access to the emergency keys for a specific location and monitor their progress.	Staff interviewed were not able to describe the process and required prompting to answer how to access and use the emergency keys.		THIS IS A STAFF TRAINING ISSUE. A BRIEFING ROOM TOPIC TRAINING HAS TAKEN PLACE ON ALL SHIFTS AND A ROSTER HAS BEEN COMPLETED TO ENSURE ALL STAFF HAVE RECEIVED THE TRAINING.	2/14/2011
Stiner	8. Are the radios serviceable and being utilized properly i.e. use of call signs, clear transmissions, no unnecessary conversation?	There were 8 radios noted as unserviceable with no action taken to repair and replace into service. Key control officer was aware of them.		Radio Services was aware of the need to repair and asked the unit not to send them as they do not have staff to repair them at this time.	
Stiner	PERIMETER AND TOWERS 1. Medium Custody units- Do the lights in the adjacent zones to either side of the alarmed zone activate when an alarm condition triggers the quarts lights associated with the alarmed zone? Interview random staff assigned to the	In 2 separate tests, the perimeter lights do not activate when the zone is activated. It was manually activated only during an ICS in the evening.		This was a contract issue. The lights for zone alams would only light up after dark. The system was on a photo cell system. This has been removed. Zone lights will now activate during daylight hours as for darkness.	2/10/2011

Stiner	2. Medium custody units-If the system has perimeter lighting, are all applicable lights operating, with no sign of visible damage, or wear?	No perimeter lights activated during zone alarm testing. When the lights were manually activated, a light was observed as being inoperative in the North West Corner just adjacent to CIP. (The second light west from the shared fence with Barchey)		Stiner Unit perimeter lights were on a photo cell system at time of the audit. Norment has taken this photo cell out to allow the lights to activate during sunlight times. The burned out lights have been replaced.	2/11/2011
Stiner	SECURITY DEVICES 1. When deficiencies are noted, does all documentation contain the cross referenced information report number from the corresponding information report(s)?	Information Report numbers for SDI discrepancies and work orders are not included in Correctional Service Journals consistently.		Supervisors have been directed to ensure these items are included in journals. This is a briefing topic and supervisor meeting topic with the Chief of Security.	2/15/2011
Stiner	2. Does the Chief of Security ensure SDI work order log repairs are made within time frames?	SDI's reported on the weekly report are out of time frames. 8/21/07 is the oldest reported discrepancy with is being reported as a contractual issue. The next oldest reported SDI is 2/4/10.		The Chief of Security is now tracking all SDI's to insure repairs are being completed in a timely manner. Contact between the Chief of Security and Complex maintenance manager is to take place if repairs are not completed in a timely manner. All SDI's f	2/11/2011
Stiner	3. Does the Chief of Security ensure staff members complete the required inspections of security devices?"	Staff do not accurately document SDI issues in Correctional Service Journals.		Staff are reporting SDI issues on information reports and are now logging them into the service journals.	2/15/2011
Stiner	4. Does the Shift Commander/Supervisor ensure staff members complete the required inspections of security devices?	Staff do not accurately document SDI issues in Correctional		Staff are reporting SDI issues on information reports and are now logging them into the service journals.	2/15/2011
Stiner	5. Do interviews with staff indicate if the EEO Liaison conduct tours or attend briefings/meetings each month on the Unit?	Staff interviewed did not know who their EEO representative is.		Stiner Unit now has a EEO liaison. Sgt. Hawethorn will be going to EEO training on March 14-16, 2011.	
Stiner	TOOLS 1. Are tools stored on a shadow board with shadow that closely resembles the tool?	Some shadows do not resemble the tool it is associated with.		All Unit tool shadows have been repainted to more closely resemble the outline of the assigned tool.	2/14/2011

Siner	2. Are tools being signed out/in appropriately on the correct form? (Tool Check Out Form 712-4)	Not all tools are consistently or correctly being signed in/out.		2/9/2011	(This finding has to do with the barbering equipment being returned after hours by swings) THE TOOL ROOM OFFICER PERSONALLY SPOKE TO THE SWING SHIFT STAFF THAT WAS NOT FOLLOWING THE POSTED TOOL ROOM AFTER HOUR PROCEDURES. THIS ISSUE HAS BEEN RESOLVED.
Siner	3. Are inventory sheets placed in all areas where tools are stored within the authorized location?	Not all tool locations have a proper or accurate tool inventory posted on them.		2/14/2011	All locations storing tools has an updated, accurate tool inventory posted.
Siner	4. Observe posted inventory sheets. Compare inventory with stored tool. Is the inventory accurate?	Tool crib #3 inventory is inaccurate. off by 3 tools.		2/8/2011	THE MASTER TOOL INVENTORY (ADC FORM #712-5PF) WAS COMPLETE AND AT 100% ACCURACY FOR STINER UNIT. THE MASTER TOOL INVENTORY WAS POSTED BY THE ENTRANCE TO THE TOOL ROOM FOR THE TOOLS LOCATED INSIDE. THE AUDITOR IN THIS FINDING IS REPORTING A "WORKSHEET 1"
Siner	5. Did the officer ensure all appropriate documents were completed?	There are tools listed on multiple tool inventory sheets.		2/8/2011	THE MASTER TOOL INVENTORY (ADC FORM #712-5PF) WAS COMPLETE AND AT 100% ACCURACY FOR STINER UNIT. THE AUDITOR IS REPORTING A FINDING DISCREPANCY BETWEEN THE POSTED MASTER INVENTORY AND A SEPARATE INVENTORY PLACED INSIDE OF A CIRCULAR SAW CASE JUST
Siner	6. Are all tools permanently engraved/stamped and color-coded?	Not all tools are permanently engraved or color coded			THE AUDITOR IS REPORTING THE NEW SLICER BEING IN THE FOOD PREPARATION AREA NOT BEING COLORED CODED OR ENGRAVED. THERE IS SOME DEBATE AS TO IF THE UNIT ENGRAVES IT, IT WILL VIOLATE THE WARRANTY...THIS IS A WORK IN PROGRESS THROUGH CANTEN.

Stiner	7. Are all tools color-coded using the applicable units assigned color	Not all tools have the units identified color code painted on them.		THE AUDITOR IS REPORTING THE NEW SLICER BEING IN THE FOOD PREPARATION AREA NOT BEING COLORED CODED OR ENGRAVED. THERE IS SOME DEBATE AS TO IF THE UNIT ENGRAVES IT, IT WILL VIOLATE THE WARRANTY...THIS IS A WORK IN PROGRESS THROUGH CANTEEN.	
Stiner	8. Is this location secured at all times, with a seal, and a master inventory contained	The door accessing the tool storage area was observed being left open and not secured. Tool cage was locked but there was no seal placed on the cage door.		NEED MORE INFORMATION ON THIS ITEM. THERE WERE NO REPORTED INSTANCES OF THE TOOL ROOM BEING FOUND IN THIS CONDITION BY THE AUDITOR OR ANY STAFF THAT WERE WITH THE AUDITOR DURING THE AUDITING PERIOD. THERE IS NO REQUIREMENT IN POLICY DO-712 FOR A *	
Stiner	9. Are all tool inventories logged into the appropriate Correctional Service Journal by those staff who conducted the inventories?	Not all tools are logged into the appropriate correctional service journal. (i.e. suicide scissors not logged in all control room journals)		THIS IS A BRIEFING ROOM TOPIC AS WELL AS A CAPTAIN/SUPERVISOR MEETING TOPIC. ALL SUPERVISORS HAVE BEEN TASKED WITH CHECKING THE POST JOURNALS TO ENSURE COMPLETENESS TO INCLUDE ACCOUNTING FOR THE "SUICIDE SCISSORS".	2/14/2011
Stiner	10. Are all shadow boards clean, and clearly marked with silhouettes closely mirroring the tools to allow for easily visual inspection and inventories?"	Kitchen tools silhouettes do not match shape of tool.		All Unit tool shadows have been repainted to more closely resemble the outline of the assigned tool.	2/14/2011
Stiner	11. Are all kitchen tools checked in / out using Tool Check Out forms, which are kept on-site for 30 days by the Food Service Supervisor?	Kitchen tools are not signed in/out accurately.		KITCHEN STAFF HAVE BEEN REDIRECTED TO ACCOUNT FOR ALL OF THEIR TOOLS AT ALL TIMES. ADDITIONALLY, THEY HAVE BEEN DIRECTED TO HAVE MORE DILIGENCE AND ATTENTION TO DETAIL "PRIOR" TO THE TOOLS LEAVING THE KITCHEN.	2/9/2011

Stiner	WEAPONS 1. Examine the weapons and ammunition for serviceability. Does the Armorer establish and maintain a system of checks and standards to ensure that firearms were maintained and in functional condition?	Weapons in tower are rusted and very dirty. There does not appear to be a check conducted on the unit weapons to ensure functional ability.		Stiner Unit does not have a "manned" tower. All weapons are secured inside a locker located in the tower. All weapons are checked and exchanged by Complex Armor.	2/9/2011
Stiner	2. While conducting your physical inventory of weapons, check a random selection to assess the quality of the repair and cleaning of these weapons. Do the weapons inspected appear clean, and serviceable?	Weapons are visibly dirty and rusted.		Stiner Unit does not have a "manned" tower. All weapons are secured inside a locker located in the tower. All weapons are checked and exchanged by Complex Armor.	2/9/2011
Stiner	3. Are all assigned weapons inspected, tested, cleaned and maintained according to the requirements listed above?	Weapons are visibly dirty and rusted.		Stiner Unit does not have a "manned" tower. All weapons are secured inside a locker located in the tower. All weapons are checked and exchanged by Complex Armor.	2/9/2011
Stiner	4. Is an accurate inventory of all assigned firearms, operational ammunition, chemical agents and other equipment being completed weekly using the Weekly Inventory, form 716-3?	Inventory is conducted only when the weapons locker is opened.		Weapon locker is secured and has a number security tag. Tag is now checked each and every shift. The tag number is called to main control and logged in the service journal.	2/16/2011
Stiner	DETENTION SERVICES 1. Review records of a random selection of inmates under investigation	Inmates in detention (2-A) beyond 30 days with no extension		Do not concur. DD Patton reviewed the detention report and the inmates reviewed did not require an extension for a 2A. It appears the auditor just looked at the file and not the complete status of the inmate.	2/9/2011
Stiner	2. If there is a watch during the time of the audit, are the watch procedures in compliance?	10 Minute watch was out of time frames by 12 minutes (22 minutes since last entry).		Staff have been redirected. Supervisors are directed to make this a briefing topic and supervisors are to be held accountable to check the logs twice daily and hold staff accountable to follow the watch orders.	2/15/2011
Stiner	3. If there is a watch during the time of the audit, observe performance of security staff and are they in compliance?	Staff observed not wearing stab vest or safety glasses while posted		Staff have been redirected. Supervisors are directed to make this a briefing topic. This is also a supervisor meeting topic with the Chief of Security.	

Stiner	4. Are the completed Observation Records submitted for the shift commander's signature at the end of every shift?	Not all observed Observation Records are signed by shift commander.		Staff have been redirected. Supervisors are directed to make this a briefing topic and supervisors are to be held accountable to check the logs twice daily and hold staff accountable to follow the watch orders.	
Stiner	5. Does the mental health/health care staff visit the inmate every four hours? Are the visits documented on the Observation Records?	Mental Health staff do not document visits on Observation Records		Staff have been redirected. Supervisors are directed to make this a briefing topic. This is also a supervisor meeting topic with the Chief of Security.	
Stiner	6. Are security staff documenting a visual check of the inmate every thirty minutes or as otherwise specified by the mental health watch order?	Time frames for some observed watches were out of time frames		Staff have been redirected. Supervisors are directed to make this a briefing topic and supervisors are to be held accountable to check the logs twice daily and hold staff accountable to follow the watch orders.	
Stiner	INMATE MANAGEMENT 1. Are searches of interior and exterior common areas conducted and documented?	Searches were observed being conducted but not entered into the correctional service journal.		Staff have been redirected in the proper procedure of logging searches into the service journal. This is a briefing topic as well as a supervisor meeting topic with the Chief of Security.	
Stiner	REQUIRED SERVICES 1. Are applications stamped "Received" including the date on the reverse side?	Some viewed files just have a date stamp without the word "received".		A stamp has been ordered for this function. Unit received the stamp and is now in use.	2/17/2011
Stiner	2. Does the visitation staff maintain a permanent record log reflecting receipt and/or transfer of all inmate visitation files?	There are two logs present to account for incoming / outgoing inmate visitation files. There are no record of incoming visitation files since 02/2010.		Logs are present. Staff have been directed by the Correctional Officer IV to utilize them for any files incoming or outgoing.	2/15/2011
Stiner	3. Are inmates screened for allowable items?	Inmate in non contact visit was observed with pieces of plastic comb in holes in his ear lobe. This was not addressed by security staff.		Staff have been redirected to observe inmates entering into visitation. Stiner is currently in the process in rotating staff out of this position.	2/16/2011
Stiner	4. Are inmates strip searched by staff prior to exiting the visitation area?	Inmate from non contact visit was not stripped searched once the visit was completed.		All inmates leaving visitation will be strip searched. All staff have been advised in briefing and this is a supervisors meeting topic with the Chief of Security.	2/14/2011

Stiner	5. Is court ordered visitation conducted on the 1st and 3rd Friday of each month?	Scheduled through DW secretary. Not scheduled on 1st and 3rd Friday of each month.	A list of all court order visits has been established and given to the Deputy Wardens secretary to ensure that these visits take place on the first and third Friday of each month.	2/16/2011
Stiner	6. Do shift commanders tour visitation at a minimum of once per shift during visiting hours?	No Correctional Service Journal entries showing shift commanders touring.	Shift Commanders have been advised that they need to sign the visitation journal each and every day.	2/15/2011
Stiner	7. During visiting hours, does the on-site duty officer tour visitation once per shift?	No Correctional Service Journal entries showing on-site duty officer touring.	Visitation staff have been advised they need to log in the On-Site Duty Officer when they arrive on the unit.	2/15/2011
Stiner	8. Are Attorneys or their agents contacting the Warden or Deputy Warden at least 48 hours in advance and provide there name, date of birth and Bar number?	DW secretary stated she is unable to meet the 48 hour requirement.	Attorneys are contacting the Deputy Wardens office 48 hours prior to requesting a visit. The secretary understood the question as are the visits completed within 48 hours.	2/9/2011
Stiner	9. Are court ordered visits documented in the inmate's visitation file?	Hendrix 210836 receives court ordered visits but does not have documented court ordered visits in his file.	CPS case worker was notified on 2/15/2011 and notified that the unit needed a copy of this court order. Case worker has faxed copy of court order and has been placed in file.	2/16/2011
Stiner	10. Does the contraband officer maintain comprehensive records of the disposition of all contraband, physical evidence, unauthorized property and unclaimed property?	Blue Yard is logged. Destruction is out of date. Red Yard is not logged.	Red and Blue yard is logged in the same log now. All destruction sheets are up to date.	2/14/2011
Stiner	11. Does the Contraband Control Officer periodically review each case to determine whether criminal or disciplinary charges were filed?	Contraband Control Officer (Property officer conducts duties) is unsure of this requirement and does not conduct periodic reviews.	Contraband Officer(property officer)does not store dangerous contraband for criminal or disciplinary charges. This contraband is turned over to Lewis Complex CIU. Property Officer is very proficient on DO909-914.	2/9/2011
Stiner	12. Were uniform shoes, boots and accouterments shined?	Observed boots were dirty.	Stiner Unit has produced a uniform inspection form for all shift supervisors to check staff uniforms daily for non compliance.	9/16/2011

Stiner	13. Is the following guidelines followed: Class "C" trousers, as outlined on Attachment C, may be worn as outlined in 1.2.3.4.2. These "B.D.U." style trousers shall be worn only with military style boots and shall be worn bloused, if designed t	Staff wearing BDU style pants were not all bloused as directed.		Stiner Unit has produced a uniform inspection form for all shift supervisors to check staff uniforms daily for non compliance.	9/16/2011
Stiner	14. Are uniform accouterments observed authorized under the provisions of this department order, and worn appropriately as prescribed within?	Some staff wearing B or A style uniform shirts did not have name tag on uniform shirt.		Stiner Unit has produced a uniform inspection form for all shift supervisors to check staff uniforms daily for non compliance.	9/16/2011

CLASSIFICATION

EAGLE POINT/SUNRISE	1. Has the COIII, COIV, Deputy Warden, or designee initiated a reclassification action on the DI99 and the DT08 10 screen for custody discretionary overrides?	Finding: The COIV did not include comments on the DT08 screen.		Response: Concur The COIV will add comments on all discretionary overrides even when they agree with the CO III comments to acknowledge the override approval.	Immediately
EAGLE POINT/SUNRISE	2. Have the COIV and COIII received the required initial and refresher training?	Finding: COIV had not taken a refresher course at time of inspection.		Response: Concur The COIV was unable to attend and will be scheduled for the next training.	Next Training class - Date to be determined by Central Office sometime in March

COUNT MOVEMENT

EAGLE POINT/SUNRISE	1. Does the shift supervisor or commander review and sign all formal count sheets?	Finding: Shift Commander is not always signing all formal count sheets.		Response: Concur All supervisors have been re-directed that they need to be in the accountability office during count to ensure all documentation is complete and accurate. They are to sign count sheets once the count is correct and all assigned inmates	Immediately
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FOOD SERVICE

EAGLE POINT/SUNRISE	1. Review AIMS screens for all inmates assigned to the kitchen. Are all inmates assigned to the kitchen medically cleared?	Finding: Not all of the inmates assigned to kitchen were medically cleared.		Response: Concur The issue was addressed immediately. It was an oversight and corrective action was taken.	Immediately
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INGRESS/EGRESS

EAGLE POINT/SUNRISE	1. Does the officer ensure all food containers / packages are brought through the metal detector?	Finding: Not all food containers/packages were cleared through the metal detector.		Response: Concur All staff have been reminded that all food and packages are to clear the metal detector. If the food fails to clear the metal detector the food item may be opened for inspection or removed from the unit. A copy of the policy and (new pos	Immediately
EAGLE POINT/SUNRISE	2. Does the officer question any manufactured food items sealed in original packaging, causing difficulty in screening the contents inside?	Finding: Several items sealed in original packaging (bag of chips, candy bars) were allowed entry without the officer questioning about them.		Response: Policy review needs to be completed. All staff have been reminded that all food and packages are to clear the metal detector. If the food fails to clear the metal detector the food item shall be opened for inspection or removed from the unit.	Immediately
EAGLE POINT/SUNRISE	3. Are all staff members required to pass through a metal detector, and clear the scanner, prior to gaining access to the unit?	Finding: On 1/26/11 persons entering unit did not clear the metal detector before gaining access to Sunrise. The staff cleared the metal detector at Eagle Point then drove to Sunrise.		Response: Concur All staff at both units will clear the metal detector when entering the unit. Staff have been redirected on this matter. Post orders contain this directive.	Immediately

EAGLE POINT/SUNRISE	4. Do assigned staff members inspect / search all personal property to include food items, and require applicable items to be cleared via the metal detector?	Finding: On 1/26/11 and 1/27/11 personal property was not searched nor cleared the metal detector at Sunrise.		Response: Concur; however, a policy review needs to be completed. All staff will have their property searched prior to entry into both units. Staff have been redirected on this matter. Post orders contain this directive.	Immediately
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KEYS AND RADIOS

EAGLE POINT/SUNRISE	1. Are all emergency key rings clearly delineated as such, and stored in the Institutional armory or in the unit armory for units not closely located or in a secured control room for units without an armory, separately from other key sets for ease of iden	Finding: Emergency key inventory does not coincide with actual keys. Inventory listed number, but the number did not match the key set. The key set was only labeled with the alpha code.		Response: Concur The inventory will updated to match the number key set.	The key control officer (from Bachman) will be at Eaglepoint to update the inventory on March 2, 2011.
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PERIMETER AND TOWERS

EAGLE POINT/SUNRISE	1. Minimum custody units- Does the Unit maintain sand traps to provide an indication of escape path or fence tampering?	Finding: Inside interior fence contains hard dirt which makes tracks not easily visible.		Response: Concur The interior Response: Concur fence line and exterior fence line have both been raked out and now foot prints are clearly visible when stepped on. This will be maintained daily.	Immediately
EAGLE POINT/SUNRISE	2. Minimum custody units-Is the Outdoor visitation space enclosed with an 10 foot high (Minimum) fence with a coil of 30" five point concertina razor ribbon mounted at the top of the fence?	Finding: Outdoor visitation space has no razor ribbon mounted at the top of fence.		Response: Concur The unit will add the additional razor wire over the next few weeks. Due to the unavailability of maintenance staff. Line staff will have to be utilized to make alterations. Additional height will have each pole by way of welding.	To be completed March 4, 2011

TOOLS

EAGLE POINT/SUNRISE	1. Are tools stored on a shadow board with shadow that closely resembles the tool?	Finding: Three cutting boards stored at Eagle Point's kitchen tool room are engraved but are not shadowed.	Response: Concur This was corrected on the spot. The shadow board was updated.	Immediately
EAGLE POINT/SUNRISE	2. Are the completed Tool Check Out Forms (712-4) kept on file in the tool room for the previous thirty days?	Finding: All areas of the tool checkout form are not always completed. Names, badge numbers and signatures are sometimes omitted.	Response: Concur Staff have been addressed on this issue verbally and the post orders have been verified that it contains directives to ensure all areas are appropriately filled out.	Immediately
EAGLE POINT/SUNRISE	3. Are inventory sheets placed in all areas where tools are stored within the authorized location?	Finding: At Eagle Point, there was no inventory posted in the area where A & B tools were stored.	Response: Concur Inventories for the "A" tool room will be added to the room.	Completed February 11, 2011
EAGLE POINT/SUNRISE	4. Are all tools permanently engraved/stamped and color-coded?	Finding: At Sunrise, all tools are not engraved. A paint roller and several brooms were not labeled.	Response: Concur All tools on Sunrise were engraved and/or labeled to meet the requirements by policy. This matter was completed on 01/25/2011	Completed January 25, 2011
EAGLE POINT/SUNRISE	5. Does the Tool Officer reconcile all tools issued to inmates at the end of the work day, prior to releasing inmates back to the yard?	Finding: At Eagle Point, tools are not reconciled at the end of the work day.	Response: Concur This was addressed with the work crew supervisor who routinely operates the tool room and advised that he needs to follow the tool room post orders and ensure that each tool is accounted for at the beginning and ending of each day.	Immediately

EAGLE POINT/SUNRISE	6. Are the kitchen tools maintained on a master inventory system, as outlined in sections 712.02, subsection 1.1 through 1.8 (Instrument sections 60 to 104)	Finding: At Eagle Point, a pastry blender was engraved and shadowed as #48. However, it could not be located on the master tool inventory. #48 was shadowed as a scooper. Oven mitt #120 was not labeled. 4 sets of extra oven mitts were in tool area but		Response: Concur Each of these issues were addressed and fixed on the spot. The oven mitts were removed from the unit by Canteen.	Immediately
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INMATE SERVICES

EAGLE POINT/SUNRISE	1. Does the Unit have a Post Order #43 Urinalysis Security Officer?"	Finding: At time of inspection, no post order #43 could be found.		Response: Concur The Unit is in the process of acquiring the post orders so they may be generalized across the complex.	In progress
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INMATE MANAGEMENT

EAGLE POINT/SUNRISE	1. Review 30 days of search logs and records. Was there a daily record of search reports?	Finding: There is no daily record of strip searches recorded in log. Only random documentation is used.		Response: Concur A "strip search" log has been designed for use to document all strip searches.	Immediately
EAGLE POINT/SUNRISE	2. Are Class C Violations disposed of within five work days of the filing date of the violation?	Finding: Class C violations are disposed of within 7 working days.		Response: Concur Violations will be disposed of within five work days.	Immediately

REQUIRED SERVICES

EAGLE POINT/SUNRISE	1. Is the sender of correspondence tapes on the Inmate's approved visitation list?	Finding: If correspondence tapes are received, the officer does not check AIMS to see if sender is on inmates approved visitation list.		Response: Concur There is no mail and property officer assigned to Eagle point as the FTE's do not allow for it. The visitation staff have also been doing all mail. The property post orders have been revised to address this matter.	Completed February 4, 2011
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EAGLE POINT/SUNRISE	2. Were all observed moustaches, side-burns, and goatee's meeting policy requirements?	Finding: Not all observed moustaches were in compliance with policy.		Response: Concur Staff continue to address this matter with the inmates. Staff have been directed to enforce grooming matters in writing with discipline when necessary.	Immediately
EAGLE POINT/SUNRISE	3. Were non-uniformed staff dressed within the guidelines of this policy?	Finding: Not all non-uniformed staff were dressed according to policy. Open-toe shoes were seen worn.		Response: Concur Rio Salado staff have been reminded of the policy requirements concerning this matter. Staff have also been directed to turn staff away if they do not meet the proper grooming and dress requirements.	Immediately
Medical	5. Are tools stored on a shadow board with shadow that closely resembles the tool?	Finding: Medical Tools are stored in a filing cabinet with no shadow.		Health Service Response: Each medical unit now has pictures in the tool and syringe binder to reconcile with the inventory.	2/18/2011
Medical	2. Are tools being signed out/in appropriately on the correct form? (Tool Check Out Form 712-4)	Finding: Not all tools are consistently or correctly being signed in/out.		Health Services Response: DO 712 distributed and reviewed by Medical Staff. Inventory forms 712-4, 712-15, 712-7, 712-8. Are currently in use at each medical unit.	2/18/2011
Buckley - CLASSIFICATION 1	Review DI95 screen for C0301 and C0401 appointments. Are any out of date?	Review of DI 95 screens revealed cases that were past time frames for classification actions.		Direction and training has been given to all CO IIIs to conduct a DI95 review daily and complete classification actions that are due to ensure time frame compliance. The CO IV is reviewing the DI95 daily to track CO III compliance as well as to complete	2/4/11
Buckley - CLASSIFICATION 2	Does the CO IV supervising the Classification officer review all actions taken by the classification officer, review AIMS data input and ensure all time frames are being met?	The Unit COIV has not reviewed all actions taken by the classification officer; reviewed AIMS data input and ensured all time frames are being met.		The newly assigned unit CO IV now reviews and tracks all AIMS data input to ensure time frame compliance. This includes DI99, DT08 10, and DI61 entries.	2/4/11

Buckley - CLASSIFICATION 3	Review the shared drive reports for DI59 and/or DI61 actions to ensure they are within time frames.	A review of the DI59 and/or DI61 AIMS screens indicates they are within time frames.		The newly assigned unit CO IV reviews and tracks all AIMS data input and the shared drive reports to ensure time frame compliance. This includes DI99, DT08 10, and DI61 entries.	2/4/11
Buckley - CLASSIFICATION 4	Review a random selection of actions based on information received during interviews or review batch screens. Are time frames met?	Time frames are not being met on all classification actions.		The newly assigned unit CO IV reviews and tracks all AIMS data input to ensure time frame compliance. This includes DI99, DT08 10, and DI61 entries.	2/4/11
Buckley - CLASSIFICATION 5	Does a COIV assign inmates to Education, Treatment and Work Based Education (WBE) programs in accordance with the inmate's individual Corrections Plan, the applicable facility priority ranking report(s) and actual vacancies in work assignments?	WIPP coordinator was unaware of the "capacity report" to determine where the job vacancies are at. Several job openings existed.		The WIPP coordinator has received field training regarding the location and use of tools such as unit capacity reports and priority ranking reports to assist in placement into programming, education, and work assignments. The unit CO IV is also aware of	2/4/11
Buckley - CLASSIFICATION 6	Determine if there are any inmate as "unassigned" in inmate work programs. Is there a valid reason for the inmate not being assigned to a work program?	WIPP Coordinator advised there are anywhere from 450 to 500 inmates unassigned in WIPP. Lack of available jobs was cited as the reason.		Unassigned work program inmates are the result of a myriad of circumstances unique to the Buckley unit. These include the use of four designator codes at the unit (L14, L28, L29, and L30), the high number of intra-unit and inter-unit DNHWS, the requireme	2/4/11
Buckley - COUNT MOVEMENT 1	Does the Accountability Officer reject pre-printed count sheets?	Kitchen out count was preprinted, some written names were added and before being signed and turned in.		Accountability Officer will be directed not to accept out counts that have been pre-filled out with inmate names. Kitchen staff will be directed not to submit preprinted out counts.	2/18/11
Buckley - FOOD SERVICE 1	Are all doors/locking devices secured and locked when not in use?	During the inspection, some doors were observed unsecured.		Training Issue / Briefing Topic. Supervisors to follow up with inspections and on the spot correction.	2/18/11
Buckley - FOOD SERVICE 2	Are equipment repairs handled correctly, and in a timely manner?"	Kitchen equipment repairs are not always completed in a timely manner. Lack of maintenance staff and awaiting parts are cited as the reasons for the delay of repairs.		Buckley Unit will continue to document and submit work orders for Kitchen equipment items that are not working properly. Additionally, the Buckley Unit will maintain a list of open kitchen work orders to be reviewed by the management team on a weekly bas	3/15/11

Buckley - INGRESS/EGRESS 1	Test system repetitively during course of inspection to determine if procedures are applied on a constant basis. Did staff consistently apply security protocols during the visit?	During the inspection of ingress/egress the following observation were made: a. Not all food items were required to be carried through the metal detector. b. One Officer was observed being allowed to step around		Training Issue / Briefing Topic. Supervisors to follow up with inspections and on the spot correction. An Ingress / Egress Post Order has been established to help clarify the duties, responsibilities, and expectations of staff conducting Ingress checks.	2/18/11
Buckley - INGRESS/EGRESS 2	Does the assigned officer question each person attempting to enter the unit in regard to possession of contraband items?	The officer conducting the searches never asked anyone questions about items they may have been carrying and not disclosing, such as amount of money.	a. Not all food items were required to be carried through the metal detector.	Training Issue / Briefing Topic. Supervisors to follow up with inspections and on the spot correction. An Ingress / Egress Post Order has been established to help clarify the duties, responsibilities, and expectations of staff conducting Ingress checks.	2/18/11
Buckley - INGRESS/EGRESS 3	Does the officer consistently inspect incoming property for possible contraband?	The officers observed during the inspection do not consistently inspect property for possible contraband.	b. One Officer was observed being allowed to step around the officer conducting the searches without the knowledge of the searcher.	Training Issue / Briefing Topic. Supervisors to follow up with inspections and on the spot correction. An Ingress / Egress Post Order has been established to help clarify the duties, responsibilities, and expectations of staff conducting Ingress checks.	2/18/11
Buckley - INGRESS/EGRESS 4	Does the officer maintain an appropriate flow control during periods of high traffic, allowing for ample time to inspect staff and property items during ingress / egress?	During shift change, only one officer was available to conduct ingress searches and was easily overwhelmed by the number of persons entering the unit.	c. The inspector was not required to carry food through the metal detector, nor was he challenges on items that may have not been authorized.	One staff member can easily conduct ingress - even during shift change - with appropriate barriers and flow control in place.	1/28/11

Buckley - INGRESS/EGRESS 5	Observe break areas and offices for personal property items that are not in compliance, or have not been authorized. Are the areas free of contraband / unauthorized property?	A glass bottle of hot sauce was observed inside the Buckley main control room during the inspection. While conducting inspections of other areas, there were several Styrofoam and hot cups that are not see through observed in different areas of the unit.		Training Issue / Briefing Topic. Supervisors to follow up with inspections and on the spot correction. An Ingress / Egress Post Order has been established to help clarify the duties, responsibilities, and expectations of staff conducting Ingress checks.	2/18/11
Buckley - INGRESS/EGRESS 6	Does the officer ensure all food containers / packages are brought through the metal detector?	Not all food items were required to be carried through the metal detector.		Training Issue / Briefing Topic. Supervisors to follow up with inspections and on the spot correction. An Ingress / Egress Post Order has been established to help clarify the duties, responsibilities, and expectations of staff conducting Ingress checks.	2/18/11
Buckley - INGRESS/EGRESS 7	Observe break rooms / lunch areas, or other locations where staff consume meals. Are unauthorized / excessive food items, utensils, or related meal items present?	A glass bottle of hot sauce was observed inside the Buckley main control room during the inspection. While conducting inspections of other areas, there were several Styrofoam and hot cup that are not see through observe in different areas of the unit.		Training Issue / Briefing Topic. Supervisors to follow up with inspections and on the spot correction. An Ingress / Egress Post Order has been established to help clarify the duties, responsibilities, and expectations of staff conducting Ingress checks.	2/18/11
Buckley - INGRESS/EGRESS 8	Monitor access points to verify all staff, and associated personal property are searched prior to access being granted to the unit. Were all staff members searched thoroughly prior to entering?	Searches were inconsistent and ineffective.		Training Issue / Briefing Topic. Supervisors to follow up with inspections and on the spot correction. An Ingress / Egress Post Order has been established to help clarify the duties, responsibilities, and expectations of staff conducting Ingress checks.	2/18/11

Buckley - INGRESS/EGRESS 9	Do assigned staff members inspect / search all personal property to include food items, and require applicable items to be cleared via the metal detector?	Not all food items were required to be carried through the metal detector.		Training Issue / Briefing Topic. Supervisors to follow up with inspections and on the spot correction. An Ingress / Egress Post Order has been established to help clarify the duties, responsibilities, and expectations of staff conducting Ingress checks.	2/18/11
Buckley - INGRESS/EGRESS 10	Inspect unit ingress / egress points and determine if there are locations where staff can by-pass and/or defeat this procedure. Are the locations secure to the degree staff cannot by-pass the security station?	Staff entering the unit have the ability to walk past the tables in the lobby area where searches are being conducted. During high traffic periods, the search area is exceptionally vulnerable.		A plan was submitted to Physical Plant to facilitate greater movement control in the lobby area. Until this can be implemented, barriers will be set up to help control movement.	1/28/11
Buckley - KEYS AND RADIOS 1	Does the inventory list all available keys, the total number of each on hand, along with the corresponding locking device each key will access?	The Master Key Inventory in Buckley Unit Main Control does not specify the total number of key sets authorized for the unit.		Master Key Inventory will be amended to include the number of Non-Restricted, Restricted, and Emergency Keysets authorized on the Unit.	2/18/11
Buckley - KEYS AND RADIOS 2	Does the inventory list all authorized key sets, including the number of keys on each ring, and the key set location?	There were twelve key sets available for review. On two occasions the number of keys on the inventory did not match the number of keys on the ring and the number stamped on the chit.		Corrected on the spot.	1/28/11
Buckley - KEYS AND RADIOS 3	Does the number of keys on the key ring, key ring tag and the inventory coincide?	There were twelve key sets available for review. On two occasions the number of keys on the inventory did not match the number of keys on the ring and the number stamped on the chit.		Corrected on the spot.	1/28/11

Buckley - KEYS AND RADIOS 4	During monthly inspections, are all keys and locking devices inspected for proper function, and damaged keys and locking devices fixed or replaced?	Two keys sets with one key each were observed with the key on each ring being broken and the lower portion of the key was missing.		Corrected on the spot. The two keys were re-cut. The missing portions were extracted from the (2) keyboxes in Main Control.	1/28/11
Buckley - KEYS AND RADIOS 5	Each time a key set is issued, or returned does the officer responsible make the appropriate entry in the Key and Credit Card Control sheet (Form 702-1) specifying at a minimum: Key number, date of issue/return, name of authorized staff member, initial o	Of the seventeen times the emergency keys were signed out, seven times there was no entry indicating the keys were returned.		Training Issue / Briefing Topic. Supervisors will be required to ensure the Emergency Keys are properly signed out / in as part of their action taken / comments portion of the emergency keyset access Information Report.	2/18/11
Buckley - KEYS AND RADIOS 6	Does each emergency key ring have a clearly visible color coded tag to identify the portals and/or buildings the key set will access?	Emergency key rings do not have a color coded tag in place. Only the compression device on the key ring is colored and in some case is hard to determine the color for the ring.		Compression rings will be re-painted as necessary.	2/18/11
Buckley - KEYS AND RADIOS 7	Does the staff member demonstrate the ability to obtain and utilize emergency keys? Randomly select a staff member from each unit and each shift and direct them to gain access to the emergency keys for a specific location and monitor their progress.	The staff member selected to perform an emergency key test had great difficulty in obtaining the requested emergency keys set and performed poorly when trying to access the request doors. Per the unit Captain, the unit does not perform training simulation		Training Issue / Briefing Topic. Monthly training and simulation requirements for each shift will be modified to require an emergency ingress simulation.	2/18/11

Buckley - PERIMETERS AND TOWERS 1	Close custody units - Does the unit have an external sand trap at least 15 feet in width and sloped to provide drainage without erosion of sand material?	The perimeter on the east side of the unit slope towards the unit allowing rain water run off water to erode under the exterior security fence. Some of the erosion was big enough for a person to crawl through unimpeded. The areas were repaired at the time		Buckley Unit continue to refill drainage areas where water has channelled under the fences, and ensure fill dirt is compacted in these areas.	1/28/11
Buckley - PERIMETERS AND TOWERS 2	Close custody units - Does the unit have an electronic detection system in place that meets the requirements listed above?	a. While observing a swing shift officer conducting daylight Security Device Inspection of the Vindicator Alarm System, the Buckley Unit Chief of Security advised and demonstrated he had the ability to make it across the alarm area without activating the		All Buckley zones have been extensively tested to identify any areas that can be crossed using the "heel and toe" method described in the finding. The sensitivity in each of these areas has been adjusted to the point where it is no longer possible to cro	1/28/11
Buckley - SECURITY DEVICES 1	Does the Chief of Security ensure SDI work order log repairs are made within time frames?	Some security device work orders have been pending for a considerable amount of time. Reasons cited for the delay were contract issue, waiting for parts to come in, funding and lack of maintenance staff.	b. The Captain stated he had elevated the issue to Norment in the past and was told to be quiet about it.	Buckley Unit will continue to report security device discrepancies to the Physical Plant Manager and communicate our concerns regarding priority of deficiencies. Additionally, the Warden has requested a quote from Norment to repair items not covered by t	

Buckley - SECURITY DEVICES 2	Does the documentation demonstrate Deputy Wardens, Associate Deputy Wardens and Chiefs of Security spend a minimum of ten hours per week touring their unit?	The December 2010 monthly report for the Deputy Warden only had documentation indicting the Deputy Warden had completed two tours of the unit. The Unit Chief of Security claims to spend the require amount of time on the unit, but admitted he does not alwa	c. While conducting a nighttime lighting inspection, the Vindicator alarm system was tested again, where an inspector and the shift sergeant were able to cross the perimeter in different areas without activating the alarm.	703-1 forms will be filled out at the conclusion of all tours, and the completed form will be included in the monthly 703 report.	2/28/11
Buckley - SECURITY DEVICES 3	Does the documentation support Deputy Warden's and Chiefs of Security submit exception reports noting any deficiencies observed during their tours?	The tour inspection reports were not available for review. Captain advises he does not always complete the required reports all of the time.	d. The following day, Security staff members from the unit were observed testing the Vindicator Alarm System for other weaknesses. The security staff member advised they had located two additional areas where the alarm would not activate.	703-1 forms will be filled out at the conclusion of all tours, and the completed form will be included in the monthly 703 report.	1/28/11
Buckley - TOOLS 1	Does the Chief of Security have a list of all authorized Tool Control Storage areas?	The Unit Chief of Security did not have a written list of tool storage areas, but rather spoke to the storage areas he was aware of. During the inspection it was evident the Chief of Security was unaware of the tools being stored to the Lock/Key office an	e. The above information indicates the Vindicator Alarm System does not function at a desired level to provide for adequate prison security for a close custody unit.	A list of authorized Tool Storage Areas has been generated and will be included on the next monthly report to the Deputy Warden. The lock/key tools have been relocated to the tool room. The tool box has been shadowed and inventories updated.	1/28/11

Buckley - TOOLS 2	Has the Chief of Security ensured a monthly reconciliation has been conducted of all authorized Tool Control Storage areas?	The Chief of Security does not ensure tool reconciliation is completed for the medical area of the Buckley Unit. The Unit Captain did not seem to be aware of the medical tool and sharps being stored on the Buckley Unit.		Medical is in the process of removing items from the area that are not necessary. Medical will be sending their tool inventory to the Unit Chief of Security at the end of each month for inclusion in the 703. The Chief of Security will complete a monthly	2/28/11
Buckley - TOOLS 3	Are there any flammable / hazardous items stored within the authorized locations?	The tool room had spray paint and the key shop had spray LPS which is flammable when sprayed.		Items removed.	1/28/11
Buckley - TOOLS 4	Are tools stored on a shadow board with shadow that closely resembles the tool?	The Lock/Key office does not have the tools shadowed. Tools are stored in tool box and contain some class "A" tools.		Tool box has been moved back to the Tool Room and sealed. Tool Box was shadowed and inventories updated.	1/28/11
Buckley - TOOLS 5	Are tools being signed out/in appropriately on the correct form? (Tool Check Out Form 712-4)	Tools in the Lock /Key shop are not being signed out when they are used to do repairs.		Tool box has been moved back to the Tool Room and sealed. Tool Box was shadowed and inventories updated. Tools will be signed out when used.	2/18/11
Buckley - TOOLS 6	Does the officer signing out the tools keep a copy of the completed form? (Tool Check Out Form 712-4)	There are no tool sign out forms in the Lock/Key office to keep on the person utilizing the tools.		Unit will order 2 part forms.	1/28/11
Buckley - TOOLS 7	Are the completed Tool Check Out Forms (712-4) kept on file in the tool room for the previous thirty days?	There are no tool sign out forms in the Lock/Key office on file for the last thirty days.		Tool box has been moved back to the Tool Room and sealed. Tool Box was shadowed and inventories updated. Tools will be signed out when used.	2/18/11
Buckley - TOOLS 8	Did the person responsible for tool control ensure all tools were accounted for at the beginning and ending of the shift?	There was no indication if the Lock/Key Officer conducts a beginning and ending tool inventory in the Lock/Key tool control storage area.		The Tool Officer will keep a Correctional Journal to document - among other things - his beginning and ending inventories.	2/18/11
Buckley - TOOLS 9	Are unserviceable tools disposed of appropriately, as prescribed in D.O. 304 Equipment and Inventory System?	Tool Room Supervisor advised unserviceable tools were destroyed by placing them in the compactor on the unit.		Expendible items such as brooms are disposed of. Control items such as shovels and rakes are disposed of through the Complex Tool Room.	1/28/11

Buckley - TOOLS 10	Does the Chief of Security or designee reconcile the Master Tool Inventory on a monthly basis?	The Chief of Security or designee does not reconcile the Master Tool Inventory on a monthly basis for the medical area of the Buckley unit. Unit Chief of Security seemed to be unaware of the sharps and tools being stored in the medical area of the Buckley		Medical is in the process of removing items from the area that are not necessary. Medical will be sending their tool inventory to the Unit Chief of Security at the end of each month for inclusion in the 703	2/28/11
Buckley - TOOLS 11	Are Class A tools stored in an area separate from Class B tools, on an individual hanging device and shadow, to avoid confusion / misidentification?	Tools in the Lock/Key office had A & B tools combine in a tool box in the office and did not have any shadows.		The tools in question do not lend themselves to being individually shadowed. They are currently stored behind three locked enclosures in a tool box that has been security sealed and has an individual inventory in place.	1/28/11
Buckley - TOOLS 12	Are Class A tools stored in tool pouches / boxes clearly marked, and shadowed within the tool carrier, for ease of inventory and visual monitoring?	Tools in the Lock/Key office had A & B tools combine in a tool box in the office and did not have any shadows.		The tools in question do not lend themselves to being individually shadowed. They are currently stored behind three locked enclosures in a tool box that has been security sealed and has an individual inventory in place.	1/28/11
Buckley - TOOLS 13	Does the Tool Officer maintain a list of all tools checked out during their shift to aid in immediate accountability?	The Lock/Key officer does not sign out the tools to ensure for immediate accountability, if it is needed.		All tools will be signed out through the Tool Room.	1/28/11
Buckley - TOOLS 14	Are master inventories completed monthly, with appropriate reconciliation documentation, and forwarded to the Chief of Security via the Health Services Administrator?	Monthly tool reconciliation of the health services area is not completed and forwarded to the Unit Chief of Security.		Medical is in the process of removing items from the area that are not necessary. Medical will be sending their tool inventory to the Unit Chief of Security at the end of each month for inclusion in the 703	2/28/11

Buckley - DART 1	Are the DART members designated as part of the B Level (may be referred to as a Task level 4 team) response identified at the beginning of each appropriate shift?	Staff members were not advised of DART designations during the briefing.		Training Issue. Supervisors directed to ensure staff are aware of their Level 5, level 4 and DART team assignments.	2/18/11
Buckley - DETENTION SERVICES 1	Inspect detention facility (including cells). Is the area clean and sanitary?	Building 4 D pod is handling Detention Unit overflow and is being operated as a detention Unit. The showers in the pod area are not clean and have mold growing in the showers. Some shower doors will not open.		Area has been thoroughly cleaned. An inmate has been designated to be the porter. Sanitation will be checked by supervisors as part of their post checks. Work orders / IR subitted on 2 shower doors. 11-L29-0273 W/O #87746 were submitetd on the doors.	1/28/11
Buckley - DETENTION SERVICES 2	a meal service. Are meals served in the same manner as general population (food quality)?	Meals are delivered to the pod are in Styrofoam trays. Trays are not delivered in a temperature control box and there is no way to track the temperatures of the food when delivered. Cold and hot items are being served in the same tray.		Canteen has been notified of the need for temperature control boxes. Separate hot / cold trays are being ordered by Complex.	2/18/11
Buckley - DETENTION SERVICES 3	Review a month of logs and records. Are records complete? Are inmates receiving required notifications and services?	During the review of records and performance inspection, it was noted inmates are not receiving all required service on a consistent basis. Inmates are missing showers, recreation, phone calls, hair cuts, etc. It was also noted inmates are not allowed ac		A schedule for showers, recreation and phone calls has been established and is being monitored by Buckley Administration. Clippers will be made available to inmates during Day Shift. Razors are not authorized for detention status inmates.	1/28/11

Buckley - DETENTION SERVICES 4	Review a random selection of Individual Inmate Detention Record, form 804-3. Do the logs include information listed under 1.4 1.4.2?	During the review of records and performance inspection, it was noted inmates are not receiving all required service on a consistent basis. Inmates are missing showers, recreation, phone calls, hair cuts, etc.		A schedule for showers, recreation and phone calls has been established and is being monitored by Buckley Administration. Clippers will be made available to inmates during Day Shift. Razors are not authorized for detention status inmates.	1/28/11
Buckley - INMATE SERVICES 1	Does the Unit have a Post Order #43 Urinalysis Security Officer?	The unit does not have a post order for the Urinalysis Security Officer.		A Post Order for Urinalysis Security Officer has been established.	2/18/11
Buckley - INMATE MANAGEMENT 1	Are staff aware of their responsibilities if an Informal Complaint or Formal Grievance at their level that describes activity that may be in violation of the Sexual Assault Procedure?	Staff members interviewed did not seem to be aware of the responsibilities if an Informal Complaint or Formal Grievance at any level which describes an activity may be in violation of the Sexual Assault procedure.		Buckley Unit staff are well aware of the actions they must take immediately when they become aware that a PREA issue may have occurred - regardless of how an inmate chooses to communicate the information.	1/28/11
Buckley - INMATE MANAGEMENT 2	Are staff members aware of the required time frames and the action that is taken in the event the time frame is violated?	Staff members interviewed did not seem to be aware of the required time frames and the action that is taken in the event the time frame is violated.		This was in response to a CO III being unaware of the emergency grievance process. The unit CO IV/Grievance coordinator will hold a training session with programs staff regarding emergency grievances and requisite time frames during the next programs me	3/15/11
Buckley - INMATE MANAGEMENT 3	Does the log reflect that grievances were addressed by the unit Deputy Warden within 15 days?	The log did not have any grievances filed for December 2010 or January 2011. During the inspection, grievance documents filed by inmates for those two months were observed in different areas of the unit.		The grievance files are under review by the current Unit COIV. The Unit COIV has established a tracking mechanism to provide a checks and balance system.	2/18/11

Buckley - INMATE MANAGEMENT 4	Does the Disciplinary Hearing Officer's finding of guilt contain a statement detailing what evidence was relied upon that specifically supports the finding of guilt?	During the inspection of the record, it was noted there were two different captains performing duties of DHO. One Captains comments were excellent. The comments made by the other Captain were lacking statements detailing what evidence was relied upon that		The current DHO hearing sheet provides check boxes that are used to indicate what evidence was used to substantiate the findings.	1/28/11
Buckley - INMATE MANAGEMENT 5	Does the Unit Deputy Warden and Warden have a copy of the monthly report submitted by the Disciplinary coordinator?	The monthly report indicated the memo is generated and sent to the Unit Captain. There was no information available to demonstrate the report is sent to the Unit DW.		The monthly report will be submitted to the Deputy Warden who will attach it to the monthly 703 and included in his report to the Warden.	2/28/11
Buckley - REQUIRED SERVICES 1	Of the files reviewed, does every 911-1 have the potential visitors full name, date of birth, address, phone number and relationship filled out?	Of the ten records reviewed, five records did not contain all of the required information on form 911-1 visitation list.		A 100% audit of Visitation files will be conducted to ensure policy compliance.	2/28/11
Buckley - REQUIRED SERVICES 2	Are applications stamped "Received" including the date on the reverse side?	Of the files reviewed, none of the electronic copies received in the files were stamped "Received" including the date on the reverse side.		A 100% audit of Visitation files will be conducted to ensure policy compliance.	2/28/11
Buckley - REQUIRED SERVICES 3	By the 28th of each month, does the visitation staff submit a memorandum listing all inmates currently on non contact visitation to the Warden?	Visitation staff reported they do not produce the monthly report for the Deputy Warden.		Visitation staff will be trained and a monthly non contact report will be generated and forwarded to the Deputy Warden.	2/28/11
Buckley - REQUIRED SERVICES 4	Did all security staff have assigned hand-cuffs and chemical agents during inspections?	Mail/Property Officer did not have he required equipment during the inspection.		Staff will be directed to wear all PPE items to include breathing shield, latex gloves, OC spray, and handcuffs. Supervisors to follow up with uniform inspections.	2/18/11

Rast	Classification: 1. Review DI95 screen for C0301 and C0401 appointments. Are any out of date?	One COIII appointment is out of date.		There was one inmate on the DI95 screen that was in need of reclassification. This inmate is temporarily absent as out to court since 7/22/10 and is still out to court. On 11/15/10, the DI95 triggered for a reclassification as his custody point total de	Completed
Rast	Count Movement: 1. Does the institution have an approved protocol for "red lining" a specific bed?	Unit is using the "red lining" tag on the count board for maintenance items such as toilet repair without administration notifications, cells were found off line for over one week.		The magnetic tags labeled "Red Line" that count movement staff generated as a device to mark a cell that needed a maintenance repair have been removed from service. Cells that are in need of maintenance have work orders issued. If the repair can be made	Completed
Rast	Count Movement: 2. Does the unit have a picture board that is updated and matches the unit inmate count?	The unit's picture board is out of date and is missing 69 pictures.		The 69 pictures have been obtained and added to the picture board. If an inmate arrives without a picture board picture, the count movement officer will generate a picture board picture from the ADC Inmate Data Search.	Completed
Rast	Food Service: 1 Are all inmate workers inspected for personal hygiene, illness, open sores or cuts before being allowed to perform duties in the kitchen?	Staff not documenting inspection of P.M. crew in the Service Journals.		The kitchen officer shift for Day shift is 0130 hours to 1130 hours on a 10 hour schedule. The kitchen officer shift for Swing shift is 1100 hours to 2100 hours, also a 10 schedule. The am kitchen inmate worker turn out is at 0200 hours. The pm kitchen	Completed
Rast	Keys and Radios: 1. Does the unit have an accurate Master Key Inventory * Review Master Key Inventories and associated documentation for past 12 months.	The Master Key Inventory was off by three keys sets in non-restricted box and one key set in the restricted key box.		The key count in the key cabinets was accurate to the key inventory where the keys are secured. The master inventory of the Best Electronic System was not updated when the keys in question were removed from the Rast Unit key cabinets. The Best master inv	Completed
Rast	Keys and Radios: 2. Does the Master Key Inventory specify the total number of key sets authorized for the institution / unit?	The Master Key Inventory was off by a total of three key sets.		The key count in the key cabinets was accurate to the key inventory where the keys are secured. The master inventory of the Best Electronic System was not updated when the keys in question were removed from the Rast Unit key cabinets. The Best master inv	Completed

Rast	Keys and Radios: 3. Does the inventory list all available keys, the total number of each on hand, along with the corresponding locking device each key will access?	The Inventory was listing three extra key sets have been pulled making the total number inaccurate.		The key count in the key cabinets was accurate to the key inventory where the keys are secured. The master inventory of the Best Electronic System was not updated when the keys in question were removed from the Rast Unit key cabinets. The Best master inv	Completed
Rast	Keys and Radios: 4. Does the inventory match up with existing key stock on hand? Compare inventory with available keys.	When compared with the key sets on hand it was discovered the inventory had three extra key sets.		The key count in the key cabinets was accurate to the key inventory where the keys are secured. The master inventory of the Best Electronic System was not updated when the keys in question were removed from the Rast Unit key cabinets. The Best master inv	Completed
Rast	Keys and Radios: 5. Does the unit have a monthly report on file showing the inspection and inventory of keys/key rings, emergency keys/key rings and locking devices for the past twelve months?	The monthly reports on hand for the past twelve months the totals on the monthly reports were off November, December, and January.		The two monthly reports for November, and December are on file in Rast administration building and were available for the auditor when the audit was conducted. January's report was not completed as the audit took place in January and had not yet been comp	Completed
Rast	Perimeter and Towers: 1. Close custody units - Do the lights in the adjacent zones to either side of the alarmed zone activate when an alarm condition triggers the quarts lights associated with the alarmed zone? Interview random staff assigned to the con	Lights activate but 2 in zone 13 are out and 1 in zone 5 is out.		The lights mentioned as not functioning have been repaired. During each shift, perimeter alarm and light inspections are conducted. If lights are discovered as not functioning, the inspecting officer will complete an Information Report, a work order wil	Completed
Rast	Security Devices: 1. Are the security device inspections conducted accurately, timely and adequately documented to be in compliance with department written directives?	When a security device inspection is conducted it is not adequately documented i.e. not including the IR number.		New process implemented 2-5-2011, includes weekly security device report maintained and updated by the COS. The COS will inspect all SDI issues reported for repairs made weekly.	On going
Rast	Security Devices: 2. Were appropriate entries made in the Correctional Service Journal?	Observed radio remote base stations not functioning, sliders in both dorms, and noted the fire alarm system is not functional these items are not being entered in the Correctional Service Journal.		The weekly reconciliation of security device work orders reports all items as previously documented. Weekly reconciliation to be provided to each location with the service journal with the purpose of pass on information regarding previously documented des	On going

Rast	Security Devices: 3. If deficiencies were discovered, were all appropriate documents submitted (information report and work order)?	Monday during the inspection the slider doors in both dorms were not operating correctly. Thursday it was observed no IR or WO had been submitted.		1/27/11, documented IR 11-L27-0328, WO - 87277, 2A slider. 1/28/11, IR 11-L27-0341, WO - 87298 for 1D and 2D sliders.	On going
Rast	Security Devices: 4. When deficiencies are noted, does all documentation contain the cross referenced information report number from the corresponding information report(s)?	The SDI list provided by the COS was used to check journals entries containing cross referenced IR etc. the journals did not contain the IR number.		Post orders state the policy requirement to document in the post journal for SDI discrepancies include the IR number and work order submitted. Briefing topic and supervisor and administration tour topic of discussion and review of post journals to ensure st	On going
Rast	Security Devices: 5. Were deficiencies requiring immediate attention addressed as "emergencies" and appropriately managed by the Chief of Security?	The Chief of Security was with me on Monday during the inspection when we noticed the slider doors having to be manually opened and shut by the inmates and staff. The deficiency was not reported nor appropriately managed by the Chief of Security.		New process implemented 2-5-2011, includes weekly security device report maintained and updated by the COS. The COS will inspect all SDI issues reported for repairs made weekly.	On going
Rast	Security Devices: 6. Does the Chief of Security maintain a current file of all documentation relating to inspections, maintenance requests, follow-up actions, and preventive maintenance programs within the institution/unit?	The Chief of Security does maintain a list but the list is not current.		New process implemented 2-5-2011, includes weekly security device report. Monthly report as per DO 703.	2/5/2011
Rast	Security Devices: 7. Does the Chief of Security ensure SDI work order log repairs are made within time frames?	Deficiencies noted on Monday and still have not been identified or anything done three days later.		SDI work orders are logged and tracked by the COS. Any SDI work orders not completed in time frames are discussed daily during the Unit management meeting and weekly with the Warden, the DWOP, and the Physical Plant Director for those SDI work orders ne	Completed
Rast	Security Devices: 8. Do the duty officer and EEO Liaison submit reports to the Wardens Office?	There is no evidence of the EEO Liaison submitting reports to the Wardens office.		Rast does have a Unit EEO, and conference meeting was held with the Unit EEO and the EEO was instructed to provide a monthly report regarding shift tours and briefing meetings by the third week of the month.	On going

Rast	Security Devices: 9. Do interviews with staff indicate if the EEO Liaison conduct tours or attend briefings/meetings each month on the Unit?	There is no evidence of the EEO Liaison conducting tours or attending briefings/meets each month on the unit.		Rast does have a Unit EEO, and conference meeting was held with the Unit EEO and the EEO was instructed to provide a monthly report regarding shift tours and briefing meetings by the third week of the month.	On going
Rast	Security Devices: 10. Does a review of random EEO Liaison reports indicate the assigned EEO liaison is making required tours?	There were no reports to review.		Rast does have a Unit EEO, and conference meeting was held with the Unit EEO and the EEO was instructed to provide a monthly report regarding shift tours and briefing meetings by the third week of the month.	On going
Rast	Tools: 1. Has the Chief of Security ensured a monthly reconciliation has been conducted of all authorized Tool Control Storage areas?	There is a monthly reconciliation but it does not address any medical tools.		Medical staff to include the FHA have been addressed to provide the COS a monthly medical tool inventory and the COS will reconcile the monthly inventory with the tools on site in the Health Unit	On going
Rast	Tools: 2. Are tool stored in a secure area, inaccessible to inmates?	The Hazardous Material locker was unsecured during inspection with inmates all around and the sanitation tool area is in an open area with no accountability.		The hazardous material locker in the sanitation area of the B Building does have a lock and the key is available in Rast main control. The box will remain locked.	Completed
Rast	Tools: 3. Are there excess amounts of tools stored on the unit?	There are large amount of brooms and mops unaccounted for in various locations, wheel chair in the vehicle sally port closet that has been there for months no one has any idea where it belongs		The brooms and mops assigned to and on inventory in the housing units have been removed from the housing units, are now secured in the sanitation B building and issued daily and returned daily to the sanitation building with inventories conducted prior to	Completed
Rast	Tools: 4. Are there any flammable / hazardous items stored within the authorized locations?	During the inspection it was noticed that there was paint and other chemicals some said caustic stored in the vehicle sally port closet.		The paint and other chemicals in the vehicle sally port office have been removed from the sally port and placed in the hazardous material locker and secured.	Completed
Rast	Tools: 5. Does the storage area comply with fire and safety codes?	A closet does not meet fire or safety codes for any flammable or hazardous item.		This finding pertains to the paint found in the vehicle sally port. The paint and has been removed from the sally port and secured in the hazardous material locker and secured.	Completed

Rast	Tools: 6. Are tools being signed out/in appropriately on the correct form? (Tool Check Out Form 712-4)	Tools in the key area are not being signed out; a ball ping hammer and two stamps sets out when the inspection took place.	This finding pertains to the key control officer issuing several of his key control tools from the key control office, specifically a hammer and two stamps. The key control officer did not utilize the tool check out form, nor did he and the officer recei	Completed
Rast	Tools: 7. Does the person who signed out/in the tools keep a copy of the sign out sheet in there possession while they have the tools signed out?	The officer did not have a copy of the sign out sheet on hand.	This finding pertains to the key control officer issuing several of his key control tools from the key control office, specifically a hammer and two stamps. The key control officer did not utilize the tool check out form, nor did he and the officer recei	Completed
Rast	Tools: 8. Does the officer signing out the tools keep a copy of the completed form? (Tool Check Out Form 712-4)	The key control officer does not sign out his tools and does not have copy of the completed form.	This finding pertains to the key control officer issuing several of his key control tools from the key control office, specifically a hammer and two stamps. The key control officer did not utilize the tool check out form, nor did he and the officer recei	Completed
Rast	Tools: 9. Are the completed Tool Check Out Forms (712-4) kept on file in the tool room for the previous thirty days?	There is no record of the tools being signed out the key tool storage area. A review of thirty days of turns from the tool service area showed 6 of them not signed.	This finding pertains to the key control officer issuing several of his key control tools from the key control office, specifically a hammer and two stamps. The key control officer did not utilize the tool check out form, nor did he and the officer recei	Completed
Rast	Tools: 10. Did the person responsible for tool control ensure all tools were accounted for at the beginning and ending of the shift?	The Tool Control Officer is posted before the end of shift so there is no ending shift inventory. The Key Control Officer does not account for all tools at the beginning or ending of each shift.	The tool control officer is a support services position at Rast and occasionally, the tool control officer is posted to Day shift do to officer shortages for the shift. The shift commander of Day shift and the tool control officer have been instructed to	
Rast	Tools: 11. Are inventory sheets placed in all areas where tools are stored within the authorized location?	There are no inventories for sanitation tools in all buildings except dorms.	The housing unit sanitation equipment (brooms, mops, mop buckets) utilized by inmate porters has been placed on carts and are kept in the sanitation bay and issued daily to the housing unit porters and returned daily. Beginning and ending inventories are	

Rast	Tools: 12. If a tool is removed permanently, is the shadow board updated immediately?	In food service tool storage area the shadow board has a silhouette of a cable that is not on the inventory.		The kitchen shadow board silhouette for the cable has been removed from the shadow board. For any other tools that are removed permanently, the shadow board will be updated immediately. The Tool room officer post order will be updated to include instruct	Completed
Rast	Tools: 13. Do nursing staff inventory and account for tools assigned to the medical areas?	There is no record of the tools being inventoried or accounted for on a regular basis only when accessed.		The health unit is used only on Tuesdays and Thursdays. All other days of the week, the health unit is not utilized. Nursing staff conduct inventories at the beginning and end of their shifts and utilize form 712-7 for accounting for tools and sharps.	2/25/2011
Rast	Tools: 14. Do dental staff inventory and account for tools assigned to the dental areas?	There was no documentation to review.		The auditors conducted the audit when no medical staff were in the health unit. Daily and monthly inventories were available for review. Rast Unit does not have any dental tools on site. All dental procedures are conducted at the Lewis Medical Cen	Completed
Rast	Tools: 15. Are tools, and instruments in long term storage sealed in tamper proof containers, locked with a break away seal, and the seals checked daily by staff responsible for conducting inventories?	No evidence that a daily seals were checked.		Tools are stored in a tamper proof container, but there not any tools stored long term. The container is opened twice per week when medical staff are working in the health unit. At the beginning and end of the shift, the tools are inventoried by nursing	2/25/2011
Rast	Tools: 16. Where these sealed containers are used for storage, are the boxes opened once per month for inventories, and or if the seal is discovered to have been broken?	There was no evidence that boxes were opened once per month.		Tools are stored in a tamper proof container, but there not any tools stored long term. The container is opened twice per week when medical staff are working in the health unit. At the beginning and end of the shift, the tools are inventoried by nursing	2/25/2011
Rast	Tools: 17. Is only the minimum number of syringes, needles, or laboratory supplies kept on-site or in storage? (Four days supply for institutions with a pharmacy on-site, or seven days for remote locations.)	There was no documentation on hand to review.		During the audit, the auditor inspected the health unit while no health unit staff were present. The container that was locked and sealed with a break away tag was not opened and inspected by the auditor nor did the auditor return when nursing staff was	Completed

Rast	Tools: 18. Are health services staff conduct a tool inventory and reconciliation of all tools, instruments, and portable sharps disposal containers at the beginning and end of each shift?	There was no evidence that health services staff conduct a tool inventory and reconciliation of all tools at the beginning and end of each shift.		The health unit is used only on Tuesdays and Thursdays. All other days of the week, the health unit is not utilized. Nursing staff conduct inventories at the beginning and end of their shifts and utilize form 712-7 for accounting for tools and sharps.	2/25/2011
Rast	Tools: 19. Are the tool inventories conducted in tandem with a uniformed security officer, or if an officer is not immediately available, a second health services employee?	In interview with security staff they are not involved in conducting inventories with the health services staff.		The health unit is used only on Tuesdays and Thursdays. All other days of the week, the health unit is not utilized. Nursing staff conduct inventories at the beginning and end of their shifts and utilize form 712-7 for accounting for tools and sharps.	2/25/2011
Rast	Tools: 20. Are master inventories completed monthly, with appropriate reconciliation documentation, and forwarded to the Chief of Security via the Health Services Administrator?	The Chief of Security has no documentation on health service tool inventories.		The health unit master inventories are being completed monthly, however, the unit COS was not provided copies from the FHA. This issue has been rectified and the FHA will provide the monthly master inventories to the COS. The unit tool room officer will	Completed
Rast	Tools: 21. Are missing / lost health services tools or instruments reported immediately to the Shift Commander, with notifications made to the Health Services chain of command up to Division Director of Program Services?	No inventory on hand.		On the day the auditor inspected the Rast health unit, no health unit staff were present. The daily and monthly inventories were in the health unit. The container for sharps was locked and sealed with a break away tag. The health unit post order includ	2/25/2011
Rast	Tools: 22. Are all kitchen tools checked in / out using Tool Check Out forms, which are kept on-site for 30 days by the Food Service Supervisor?	A review of the tool check out forms for thirty days revealed 6 of them where not signed.		This finding pertains to tool check out forms on file for 30 days with the food service manager in the kitchen not being complete for signatures. The kitchen staff were utilizing photo copied tool check out forms to write in tools that were checked out.	Completed
Rast	Detention Services: 1. Review a month of logs and records. Are records complete? Are inmates receiving required notifications and services?	There is no mention of inmates receiving medical or recreation services.		In consultation with the FHA, when medical staff complete daily health and welfare checks of inmates in Rast detention, the officer assigned to detention will complete an entry on the Individual Inmate Detention records and in the post service journal. T	2/25/2011

Rast	Detention Services: 2. Review a random selection of Individual Inmate Detention Record, form 804-3. Do the logs include information listed under 1.4-1.4.2?	Reviewed 804-3 and there was not record of inmates being offered recreation or medical services.		In consultation with the FHA, when medical staff complete daily health and welfare checks of inmates in Rast detention, the officer assigned to detention will complete an entry on the Individual Inmate Detention records and in the post service journal. T	2/25/2011
Rast	Detention Services: 3. Review records; Are mental health staff conducted daily evaluations of the inmates on watches?	Reviewed records and there is no evidence of mental health staff conducting daily evaluations.		Inmates are housed in Rast cells on mental health watches as the designated watch cells at Stiner CDU are occupied. In consultation with mental health staff, when mental health staff conduct their daily evaluations of inmates at Rast on mental health wat	2/25/2011
Rast	Detention Services: Review records; Are medical health care staff completed health and welfare checks at least once each day during non-business hours.	During document review records show no evidence of medical health care staff completing health and welfare checks at least once each day during business or non-business hours.		In consultation with the FHA, when medical staff complete daily health and welfare checks of inmates in Rast detention, the officer assigned to detention will complete an entry on the Individual Inmate Detention records and in the post service journal. T	2/25/2011
Rast	Detention Services: 5. Review historical records for proper documentation. Does the record indicate staggered observation times within the required time frames to include at shift change?	In review of documentation it was discovered observation times where not staggered.		Inmates on mental health watches at Rast are conducted by officers from the units the inmates originated from, thus, every day different officers are assigned to observe the inmates on watches. The supervisors of Rast are well versed in the observation	2/25/2011
Rast Duplication of Detention Services #5	Detention Services: 6. Review historical records for proper documentation. Does the record indicate staggered observation times within the required time frames to include at shift change?	In review of documentation it was discovered observation times were not staggered.		Inmates on mental health watches at Rast are conducted by officers from the units the inmates originated from, thus, every day different officers are assigned to observe the inmates on watches. The supervisors of Rast are well versed in the observation	2/25/2011

Rast	Detention Services: 7. Review the records; have the mental health care staff or medical health care staff conducted daily evaluations as required?	There is no evidence of mental health or medical care staff conducting daily evaluations as required.		In consultation with the FHA, when medical staff complete daily health and welfare checks of inmates in Rast detention, the officer assigned to detention will complete an entry on the Individual Inmate Detention records and in the post service journal. I	Completed
Rast	Detention Services: 8. Are meals served according with the policy and any instructions from the health care staff?	Documentation on inmate Greathouse 1/14/11 did not indicate that he received any meals.		I/M Greathouse 249381 was placed into a Rast Unit cell on a ten minute mental health watch and arrived at Rast Unit on 1/14/11 at 0910 hours and came from Stiner CDU. The Observation Record was started at 0910 hours at Rast, well after breakfast and his b	Do not concur.
Rast	Detention Services: 9. Does the mental health/health care staff visit the inmate every four hours? Are the visits documented on the Observation Records?	No record of mental health care staff visiting every four hours.		Per DO 807, section Levels of Observation, for all levels of watches, mental health staff are to evaluate the inmates on watches at least once per day, not every four hours. DO 807, Section 807.05 (Levels of Observation) 1.2.2.2, 1.3.6, and 1.4.6 state men	Do not concur.
Rast	Inmate Management: 1. Does the disciplinary coordinator initiate an objective investigation within 24 hours of receiving the ticket?	Disciplinary Coordinator takes up to 5 days waiting on paperwork before initiating an objective investigation.		All disciplinary reports are reviewed during the morning administrative briefings along with the disciplinary coordinator. The reports are presented at that time to the DC, starting the objective investigation. Rast now has a full time DC and no longer r	Completed
Rast	Inmate Management: 2. Are Class C Violations disposed of within five work days of the filing date of the violation?	It is taking between 10-20 days to dispose of Class C Violations.		All disciplinary reports are reviewed during the morning administrative briefings along with the disciplinary coordinator. The reports are presented at that time to the DC, starting the objective investigation. Rast now has a full time DC and no longer r	Completed
Complex	count movement	Not all required items are addressed in institutional Order		New Institutional Order to be written	3/30/2011
Complex	Count movement	institutional order does not specify the requirements of the masterpass system		New Institutional Order to be written	3/30/2011
Complex	Keys and radios	during inspection inmates were observed in possession of keys, there was written authorizations signed by the Warden, Deputy Warden or Administrator		Memo's being completed for Tram driver's Motorpool and physical plant inmates that all could be in possession of keys	2/28/2011

Complex	Keys and radios	Key Control Officer does not have a file on written Authorizations for inmates to possess keys		Key control Officer has opened a file that will include all written authorizations for inmates to possess keys	2/18/2011
Complex	Keys and radios	Institutional Order authorizes the Deputy Warden to approve Key duplications, there was no file to indicate who authorized any key duplications for the complex or units		Key control Officer has opened a file that will include all written authorizations for key duplications for all units and complex.	2/18/2011
Complex	Keys and radios	Emergency Key Duplications are not authorized by the warden or designee and there were no documents on file to review		Key control Authorizations are now being authorized by complex warden and written authorizations are being kept on file by complex key control.	2/18/2011
Complex	Security Devices	Chief of Security does not ensure that SDI Work orders log repairs are made within time frames		Chief of Security will review SDI Work Orders daily with PPS to ensure all repairs are made within time frames	2/11/2011
Complex	Security Devices	EEO Liaison does not conduct monthly tours or attend briefings/meetings each month on the unit		Complex EEO Liaison will complete monthly tours of briefing and submit a report by the 25th of every month to the warden's office.	2/28/2011
Complex	Security Devices	EEO Liaison does not submit reports to the Warden's office Monthly		Complex EEO Liaison will complete monthly reports to the warden's office document tours and if any findings or issues.	2/28/2011
Complex	Security Devices	EEO Liaison is not conducting required tours		Complex EEO Liaison will completed monthly reports to the warden's office document tours and if any findings or issues.	2/28/2011
Complex	Tools	Complex Canine area has a large supply of unnecessary tools, last tool check completed Oct 1, 2010		All unnecessary tools being removed from area, and beginning of shift tool accountability and end of shift tool accountability to be completed and documented in the main control service journal.	2/10/2011
Complex	Tools	Canine and water treatment currently has no system of accountability for tools stored in authorized area.		Water treatment tools have been removed and staff will conduct beginning of shift tool accountability and end of shift tool accountability to be completed and documented in the main control service journal.	2/10/2011
Complex	Tools	Fleet is non compliant with the person having in their possession a copy of the tool signout sheet while they have the tools signed out		Security staff have been instructed to ensure that all tools signed out of the tool room are documented appropriately and the documentation with on the person who is responsible for that tool.	2/11/2011

Complex	Tools	Canine and water treatment plant are do not ensure that all tools were accounted for at the beginning and ending of the shift		Water treatment tools have been removed and Staff assigned will conduct beginning of shift tool accountability and end of shift tool accountability to be completed and documented in the main control service journal for the canine area.	2/28/2011
Complex	Tools	Fleet and water treatment do not follow the I.O regarding the color coding of tools		Water treatment tools have been removed and Fleet is currently painting all tools assigned to the tool room	3/10/2011
Complex	Tools	Canine and water treatment plant currently have no records, service journals, that reflect the tool inventories being logged		Water treatment tools have been removed and staff will conduct beginning of shift tool accountability and end of shift tool accountability to be completed and documented in the main control service journal.	2/28/2011
Complex	Tools	Fleet is non-compliant with each inmate receiving a tool having a copy of the tool check out form on their person at all times when using the tool.		security staff have been instructed to ensure that all tools signed out of the tool room are documented on the Tool Checkout Form and the documentation is on the inmate who is responsible for that tool during the entire time while he is using the tool.	2/11/2011
Complex	Weapons	Canine handlers are not included in the list of staff authorized to enter the armory, but do so routinely to access the narcotics safe for training aides		Narcotics safe has been removed from the Armory	2/4/2011
Complex	Weapons	The armory is currently not being used for weapons storage. A safe in the armory contains narcotics for for training narcotics dogs.		Narcotics safe has been removed from the Armory	2/4/2011
Complex	Weapons	There is no system in place to address after hours entry into of the armory regarding which staff are authorized.		Major's office has given direction as to the process for entering the armory and who is allowed to enter the armory.	2/28/2011
Complex	Weapons	Narcotics Canine Handlers enter the armory on a routine basis and do not write an IR or conduct and inventory when entering the armory		Narcotics safe has been removed from the Armory, Narcotics Canine Handlers will no longer need to regularly enter the armory for training aids.	2/4/2011
Complex	Weapons	Door seals are not being routinely entered into the Correctional Officer's Journal to demonstrate that the door seals have been checked and verified.		All staff and supervisors have been given instruction to ensure that beginning and ending inventories of door seals are being conducting and entered into service journals.	2/4/2011

Complex	Weapons	The Weekly inventory of all assigned firearms, operational ammunition, chemical agents and other equipment is not being completed weekly using the Weekly Inventory, form 716-3. The Inventory is being completed on the daily form		Correct Form is already in use and the armorer has been given instruction to ensure that weekly inventories and checks of all weapons are being completed.	2/4/2011
Complex	Weapons	Complex is not in compliance with logging the seal numbers for the DART Lockers in a correctional service Journal each work shift		All staff and supervisors have been given instruction to ensure that beginning and ending inventories of DART seals are being conducting and entered into service journals.	2/4/2011
Complex	Weapons	Staff are not in compliance with DO 716 regarding the accountability of seals used on the DART locker		All staff and supervisors have been given instruction to ensure that beginning and ending inventories of DART seals are being conducting and entered into service journals.	2/4/2011
Complex	Weapons	The Armory has no Correctional Service Journal for the records to be kept in reflecting proper inventories being completed for the last 180 days.		Service Journals are now being completed and submitted to the Chief of Security.	2/4/2011
Complex	Weapons	Complex maintains Stun Devices and does not have a system in place to ensure that they are only issued to those staff that are trained in their use and as outlined in the Applicable IO		Training and Firearms instructor is compiling a list of all Lewis complex staff that have been trained and certified in the use of Stun Devices. Warden to complete Insitution Order	2/28/2011
Complex	Weapons	The Institution Order is outdated which includes the ERP, Fire Evacuation plans, responce to bomb threats and local requirements for section 706.03		Warden to complete updated I.O.	3/30/2011
Complex	Inmate Services	The required Insitution order regarding time limits is out of date.		Warden to complete updated I.O.	3/30/2011
Complex	Required Services	The insitution order regarding mail addressing, outgoing and incoming mail, inter-relation mail; mail room operations and mail contraband is not dated with 90 days of the Department Order		Warden to complete updated I.O.	3/30/2011